

2006

Truth as Relationship: The Psychology of E. Graham Howe

Ian Charles Edwards

Follow this and additional works at: <https://dsc.duq.edu/etd>

Recommended Citation

Edwards, I. (2006). Truth as Relationship: The Psychology of E. Graham Howe (Doctoral dissertation, Duquesne University). Retrieved from <https://dsc.duq.edu/etd/518>

This Immediate Access is brought to you for free and open access by Duquesne Scholarship Collection. It has been accepted for inclusion in Electronic Theses and Dissertations by an authorized administrator of Duquesne Scholarship Collection. For more information, please contact phillips@duq.edu.

Truth as Relationship: The Psychology of E. Graham Howe

By

Ian C. Edwards

**A Dissertation Presented for the Degree of Doctor of
Philosophy in Clinical Psychology**

**Duquesne University
2006**

To Cindy and Seth, for their everlasting love and enduring patience.

Table of Contents

PART I	INTRODUCTION	
Chapter 1	The Importance of E. Graham Howe's Work	pg. 5
PART II	HOWE'S PLACE IN THE HISTORY OF PSYCHOANALYSIS	
Chapter 2	Situating Howe	pg. 25
Chapter 3	Howe's Psychology of Depression	pg. 67
Chapter 4	Howe on the Inferiority Complex	pg. 84
Chapter 5	Howe's Psychology of Love	pg. 106
Chapter 6	Howe's "Selves" Psychology	pg. 129
PART III	THE CENTRAL THEMES OF HOWE'S PSYCHOLOGY	
Chapter 7	The Psychology and Philosophy of Relationship	pg. 173
Chapter 8	The Psychology for the Whole Man	pg. 187
Chapter 9	Time and the Unconscious: Howe's Dialog with Jung	pg. 199
Chapter 10	The Psychology of War	pg. 215
Chapter 11	Psychotherapy: The Art and Science of Healing	pg. 225
PART IV	CONCLUSION	
Chapter 12	Howe's Legacy	pg. 237
Bibliography		pg. 241

PART I

Introduction

CHAPTER 1

The Importance of E. Graham Howe's Work

“This country (England) has a curious way of ignoring its great men when they are alive, and honouring them when they are dead. I doubt if this worries Eric Graham Howe very much, but it would be a pity for us if we are not to recognize that here is a distillation of a master psychologist”

- R.D. Laing in his Foreword to *Cure or Heal?*

Dr. Eric Graham Howe (d. 1975) was one of the most important psychologists in early 20th century Britain. Yet, for the most part, his work is relatively unknown. In 13 books and countless articles, Howe wrote on a wide variety of topics, exerting a profound influence on R.D. Laing, Alan Watts, and Henry Miller, to name a few. In a foreword to Howe's *Cure or Heal? A Study of Therapeutic Experience* (1965) R.D. Laing wrote that Howe's books “differed from any others by psychiatrists in this country (England), in that they brought to bear on empirical issues an understanding that derived from spiritual experience” (p. 9). Laing went on to assert that because Howe's books

“were written in a clear and simple way, unimpeded by psychiatric jargon, the psychiatric profession evaded giving them serious attention...” (Howe, 1965, p. 9).

During the early 20th century there was a groundswell of interest in psychoanalysis in England. This interest prompted the formation of the Tavistock Clinic in 1920. Howe, who was one of its founding members, published the first series of articles on psychotherapy in *The Lancet*. In the 1930's and 40's, when

controversies over Sigmund and Anna Freud and Melanie Klein swept much of British psychiatry, Howe's jargon-free writings were destined for certain obscurity. With its own semantics and pragmatics, psychoanalysis became a kind of dogma that had both adherents and detractors. In order to maintain doctrinal purity, mainstream psychoanalysis employed a clearly defined theoretical framework that functioned to say something *about* its theory rather than simply describe psychological life. By making minimal use of psychoanalytic words and concepts such as, projection, regression, reaction formation, and splitting, Howe affiliated himself with a theoretical out-group that the mainstream reserved for Jungians, mystics, occultists, and bohemians. Yet, when Howe did utilize psychoanalytic concepts, he did so for the purpose of illuminating his patients' psychological lives, rather than displaying the brilliant edifice of psychoanalytic theory, as was often the case with orthodox psychoanalysts in Howe's day. And because of the warring factions, the brilliant edifice of psychoanalytic theory often seemed like a virtual tower of Babel, which confounded and obfuscated critics and practitioners alike.

Except for a brief period at its inception, mainstream psychoanalysis frowned upon many of its more independent and innovative thinkers. Howe's emphasis on the primacy of the individual and his distaste for the growing psychoanalytic monopoly of psychotherapy led him to become highly critical of the British Psychoanalytic Schools; and it motivated him to explore alternative approaches to the mind, e.g. Phenomenology, Buddhism, etc. Yet, as Dr. John

Heaton, author of *The Self, The Divided Self and the Other* (1994), observed, while refusing the label of psychoanalyst, Howe also eschewed the labels of “Buddhist,” “Existentialist,” etc. (Personal Correspondence, March 2003). A label of any kind shifts the emphasis toward the associated school and away from the individual whose dynamics the school purports to be studying.

Howe’s unwillingness to embrace any label suggested that he was an “anti-systematic” thinker, much like Kierkegaard, Martin Buber, Krishnamurti, and R.D. Laing. According to Daniel Burston, “an anti-systematic thinker is one who lives by the conviction that no single system of ideas can possibly encompass or express the depth and complexity of the psyche or the cosmos, and that efforts to do so inevitably shut down the possibility of authentic encounter (with cosmos and/or self)” (Personal Correspondence, June 2003). Thus, anti-systematic thinkers are not simply “un-systematic,” in that they lack a system. They reject “systems” on principle. Why? Because any psychotherapy or wisdom tradition that requires the acceptance of a clearly defined conceptual apparatus in order for “healing,” “salvation,” “enlightenment,” “wholeness,” etc. to occur is simply offering the individual a better furnished prison, rather than true freedom. From Howe’s perspective, psychoanalysis liberated its adherents from the crippling effects of religious and scientific dogma, while creating a new conceptual prison that subtly enslaved patients to a different master.

Unfortunately, Howe’s aversion to dogma and a “party line” had tangible consequences for his reception. In 1933, Howe had lunch with Ernest Jones, who

wanted him to join the British Psychoanalytic Society. Howe refused. He disliked Jones, whom he found quite “shifty” (Heaton, Personal Correspondence, March 2003), and probably distrusted him on account of the embargo that Jones put on the Tavistock Clinic.¹ Jones, then head of the Institute of Psycho-Analysis, felt threatened by the Tavistock Clinic’s eclecticism, and prevented serious students from coming in contact with “unorthodox” ideas.

Howe was very much at home in the Tavistock Clinic. But the fact that he was a major player at its inception scarcely registers in the literature. Eric Trist’s three-volume Tavistock anthology *The Social Engagement of Social Science* (1993) does not even mention Howe or his writings. In fairness to Trist, perhaps, his work chronicles the development of the Tavistock Institute of Human Relations from 1941-1989, and says little about the period preceding WW II. It is often assumed that the Tavistock Clinic and the Tavistock Institute of Human Relations refer to the same organization. This is because the founders of the Tavistock Institute were known as the “Tavistock Group”, on account their being core members of the pre-WW II Tavistock Clinic (See Trist, 1993, p. xi). While members of the Tavistock Clinic founded the Tavistock Institute, they were different organizations.

Immediately after World War I there was a growing recognition that neurotic disabilities were not merely transitory phenomena related to the stress of war, but were pervasive in modern society. In order to address this “felt social

¹ See Dorothy Heard’s Introduction to Ian Suttie’s *The Origins of Love and Hate*.

need,” the Tavistock Institute of Medical Psychology (better known as the Tavistock Clinic), the parent body of the post-World War II Institute, was founded in 1920 by Hugh Crichton-Miller as a voluntary outpatient facility (See Trist, 1993, p. 1). Unlike Trist, whose anthology deals with the Tavistock Institute, H.V. Dicks’ *Fifty Years of the Tavistock Clinic* (1970) deals specifically with the history of the Tavistock Clinic. It was difficult for Dicks to obtain any of the Clinic’s records from the 1920’s and 30’s because most of them were destroyed in the bombing of London during World War II. Despite that fact, some annual reports and a few press cuttings were retained.

The Tavistock Clinic was basically psychodynamic in its orientation. This orientation was referred to as the “New Psychology,” and combined the insights of both Freud and Jung. One of the major differences between the Tavistock Institute of Human Relations and the Tavistock Clinic is that the Institute was firmly grounded in the object-relations theoretical orientation whereas the Clinic remained cheerfully eclectic, insisting on having “no doctrine.” Consequently, when Hugh Crichton-Miller sought to employ staff members for the Tavistock Clinic, he did not seek psychiatrists and psychologists on the basis of their theoretical orientation. Rather, “the appointments to the staff were made chiefly from those who decided to devote themselves to psychotherapy or psychological medicine as their way of life” (Dicks, 1970, p. 34). Howe was recruited from the residences at Bethlem and Bowden House, which had opened an offshoot for psychotics at Oxhey Grove. Howe’s understanding of psychopathology, as

evidenced in his *Lancet* articles, came in part from his work at Bethlem and Bowden. The *Lancet* articles, which were eventually published as *Motives and Mechanisms of the Mind*, were originally given as a series of post-graduate seminars in the autumn of 1930 under the auspices of the Tavistock Clinic. Isabel Wilson and H.V. Dicks first conducted these post-graduate seminars. However, upon the resignation of Isabel Wilson, Howe was appointed as the second tutor (Dicks, 1970, p. 42).

Howe lectured very much as he wrote – he *became* the subject matter rather than simply talked *about* it. R.D. Laing noted that Howe “does not write *about* anything, existentialism or Zen for instance. His writing *is* existential and Zen” (Howe, 1965, p. 9). The fact that his work is still relatively unknown can be traced to his insistence on maintaining a phenomenological perspective when such a perspective was deemed “mystical” by psychoanalysts and “unscientific” by biologically oriented psychiatrists. From their perspective, any psychologist who employed imagery from the world’s wisdom traditions could not possibly be a genuine clinician. This was also the case with C.G. Jung, though unlike Howe, who had a strong influence on many analysts in Britain. Because Jung’s work was dense, highly varied, and somewhat esoteric, an introductory survey of Jung’s writings was urgently needed. Thus, in 1942, Jolande Jacobi’s *The Psychology of C.G. Jung* was published in England. And her reason for writing the book, she said:

“...was the ever growing public demand for a comprehensive but concise account of the elements of the teachings of C.G. Jung, with a view to easing the approach to his extraordinarily fertile and multidimensional work... To condense a man’s whole lifework, the fruit of sixty years of research, into so narrow a compass is an almost insoluble task, and the result must necessarily remain a mere sketch. Such a book may nevertheless encourage the interested reader to take the plunge into Jung’s voluminous writings and to experience for himself the plenitude of psychological and human insights that touch upon nearly every area of life and domain of knowledge” (Jacobi, 1973, p. xi).

By contrast, there was no great demand for a comprehensive introduction to Howe’s work. But this does not mean that such an account was not *needed*, even today. The fact that Howe was not “in demand” is the result of the fact that Howe was dismissed by “scientific” psychiatry and psychoanalysis because he employed concepts derived from spiritual practice and existential-phenomenology and applied them to an understanding of psychotherapy.

It is instructive to note that in 1941 Henry Miller wrote an essay entitled *The Wisdom of the Heart* that beautifully summed up three of Howe’s works: *I and Me*, *Time and the Child*, and *War Dance*. Miller’s essay on Howe was a labor of love, which makes many astute observations with reference to three of Howe’s early works. But it is far too short to provide a comprehensive view of Howe’s entire corpus. After all, in 1941, Howe had not yet published some of his major works, such as *Cure or Heal?* and *Mysterious Marriage*. Moreover, being primarily a writer of autobiographical fiction who only dabbled in therapy, Miller approached Howe as a philosopher and poet rather than a psychologist. Not surprisingly then, he highlighted Howe’s philosophical and literary skills while

(inadvertently) downplaying Howe's stature as a psychologist and psychotherapist.

For example, he wrote:

E. Graham Howe is a man in his prime, healthy, normal in the abnormal sense, successful, as the word goes, and desirous more than anything else of leading his own life. He knows that the healer is primarily an artist, and not a magician or a god. He seeks, by expressing his views publicly, to wean the public of a dependency which is itself an expression of disease. He is not interested in healing, but in being. He does not seek to cure, but to enjoy life more abundant. He is not struggling to eliminate disease, but to accept it...(Miller, 1960, pg. 44).

From Miller's perspective, Howe demonstrated the importance of the "indirect or Oriental way of life" (Miller, 1960, p. 32). This "artistic," "rhythmic" way of life was emphasized, and importantly, lived by the Chinese sages Lao-Tzu and Chuang-Tzu. In similar fashion, Havelock Ellis and Alan Watts likened it to a dance, where openness and acceptance pave the way for a fluid movement that effortlessly embraces all aspects of life. Miller (1960) went on to indicate how acceptance and relaxation are integral to both a successful dance and an effective psychotherapy:

The acceptance of the situation, any situation, brings about a flow, a rhythmic impulse toward self-expression. To relax is, of course, the first thing a dancer has to learn. It is also the first thing a patient has to learn when he confronts the analyst. It is the first thing any one has to learn in order to live. It is extremely difficult, because it means surrender, full surrender (pp. 32-33).

Miller asserted that Howe's perspective was based on "this simple, yet revolutionary idea of full and unequivocal surrender" (Miller, 1960, p. 33). This idea of surrender was based on a kind of radical acceptance of suffering, which was not to be confused with masochism. Rather, said Miller, it indicated Howe's

return to the “wayless way” of Lao-Tzu and “first noble truth” of the Buddha as paths towards, not the negation or exaltation of suffering, but to the “religious view of life”:

It (the religious view of life) is the long way round, which has always proved to be the shortest way after all. It means the assimilation of experience, fulfillment through obedience and discipline: the curved span of time through natural growth rather than speedy, disastrous short-cut. This is the path of wisdom, and the one that must be taken eventually, because all the others only lead to it (Miller, 1960, p. 33).

In Taoist fashion, Miller played with paradoxical descriptions of distances in Howe’s “religious view of life.” Implicit in Miller’s characterization, was Howe’s non-linear understanding of time: “The element of Time, so fundamental in Howe’s philosophy, is a restatement, in scientific language, of the esoteric view that one cannot travel on the Path before one has become that Path himself” (Miller, 1960, p. 41). While Miller articulated Howe’s understanding of time-consciousness admirably, his relative unfamiliarity with psychological and psychoanalytic literature prevented him from demonstrating the importance of this concept for the practice of psychotherapy.

Nevertheless, like R.D. Laing, Miller suggested that scholars and academics overlooked Howe on account of his jargon-free mode of expression:

Few books dealing with wisdom – or shall I say, *the art of living?* – are so studded with profundities as these three books (*I and Me*, *Time and the Child*, *War Dance*). The professional thinker is apt to look at them askance because of the utter simplicity of the author’s statements...In the present case we are dealing with a man for whom writing is a stolen luxury, a fact which could be highly instructive to many writers who spend hours trying to squeeze out a thought (Miller, 1960, p. 33).

Unfortunately, in the minds of most professional people, simplicity is seldom associated with profundity of thought. Philosophical and psychoanalytic works deemed “great” by prevailing standards often couple clever obfuscation with genuine depth and substance. A psychologist like Howe, whose writing style was both “Zen and Existential,” is *still* apt to be disregarded simply because he did not use language in a way that referenced or augmented a growing lexical canon for psychologists and philosophers. Like Krishnamurti, Howe “looks at the world as it is now, this moment. He sees it very much as he would a patient coming to him for treatment” (Miller, 1960, p. 33). By contrast, many of Howe’s contemporaries saw patients as walking embodiments of theoretical abstractions: an Oedipus complex, an anima projection, a chemical imbalance, etc. While Howe borrowed terminology from various schools of thought, he did not depend on them at the cost of experiential knowledge. On the contrary, Howe’s empathic clinical posture and jargon-averse writing style allowed him to attend closely to phenomena that he felt were often overlooked.

Miller was correct in asserting Howe’s belief that pain and suffering cannot be “driven out with a stick.” However, he missed the point when he claimed that the “the remedy is metaphysically achieved, not therapeutically” (Miller, 1960, p. 33). For Howe, as it happens, this statement implied a false dichotomy, since metaphysics and psychotherapy both involve a “change in the map of life by changing our attitude toward it.” In view of circumstances, however, one can imagine why Miller interpreted Howe that way. In 1941, psychotherapy in

America was based primarily on psychoanalysis and behaviorism. In England, it was based primarily on Freudian and Kleinian psychoanalysis. Psychotherapy as psychoanalytically and behaviorally conceived does not necessarily involve changing one's "map of life." Instead, psychotherapy was thought to involve a change in attitude toward oneself; psychotherapy was primarily ego-based. Howe's psychotherapy shifted the emphasis from the ego to the Self in an attempt to resituate the foundation of healing in a kind of metaphysical-therapeutic practice.

Miller's tendency to oversimplify Howe was also evident when he contrasted Howe's understanding of what can be called the *via negativa* versus the *via positiva*:

The negative view of life, which is really the death-like view of things, summed up by Howe in the phrase "infinite regress," is gradually giving way to a positive view, which is multi-dimensional (Miller, 1960, p. 42).

It is important to keep in mind that Howe advocated the adoption of the positive view *by accepting the negative* – pain, suffering, etc. While this fact is alluded to in Miller, he did not make this very important point clear. According to Howe, it is our acceptance of the negative that gives birth to what he called "discipline." Howe's understanding of discipline was not in any way an affirmation of absolute principles. Rather, said Miller,

It is based on the recognition of the duality of life, of the relative rather than the absolute. Discipline permits a free flow of energy; it gives absolute freedom within relative limits. One develops *despite* circumstances, not because of them (Miller, 1960, p. 44).

The ability to be disciplined, in Howe's sense of the word, is a quality integral to an anticipation (and subsequent prevention) of the infinite regress so characteristic of the psychology of war. Paradoxically, for Howe, we avoid war by accepting and surrendering to the fear in ourselves, the very fear that drives us toward the desire to destroy the other.

Unfortunately, since the essay by Henry Miller (1941) and R.D. Laing's foreword to *Cure or Heal?* (1965), there has been scant mention of Howe in the literature. John Heaton, a friend and colleague of Howe and Laing, noted that the former exerted a great influence on the latter (Personal Communication, March 2003). And, in his book *The Wing of Madness: The Life and Work of R.D. Laing* (1996), Daniel Burston said:

Howe joined the Tavistock Clinic in 1928 and was the author, among other books, of *Motives and Mechanisms of the Mind* (1930), *The War Dance: A Study of the Psychology of War* (1939), *Mysterious Marriage* (1942) and *Cure or Heal?* (1965), to which Laing wrote a warm introduction. Howe's father was a bishop, and he himself tried to synthesize Christianity and Buddhism, and was a friend of Krishnamurti, D.T. Suzuki, Nyanaponika Mahathera, and Alan Watts – men who played a significant role in bringing eastern philosophy and spiritual practices to the west. Laing met Howe at John Heaton's home in 1960, and they became good friends. In 1962 Howe was instrumental in securing the directorship of the Langham Clinic for Laing (p. 57).

While this brief mention of Howe was most welcome, we must be careful in assuming that Howe synthesized Buddhism and Christianity. While Howe made use of the imagery and language of the various wisdom traditions in his theories, he did not reduce the “many into one” as is commonly done in a blend. And, though Howe was a friend of Krishnamurti, D.T. Suzuki, and Nyanaponika Thera,

he seemed to honor them by *not* writing *about* them. Rather, it was Howe's attitude, his lifestyle, and his relationships with others that honored his friends. By so doing, he lived what was most important to him, namely a life of *discipleship*, a life of *discipline*.

For Howe, discipleship did not necessarily involve being a disciple to any particular person or idea. On the contrary, the very spirit of discipleship involves the liberation from attachment to persons and/or ideas. This notion radically contradicts our understanding of what discipleship "is." In the instance where a guru, spiritual teacher, or psychotherapist is involved, the function of each is simply to point to the "guru," "spiritual teacher," or "psychotherapist" that lies within the aspirant or patient. The fact that we immediately associate the disciple with submission to a spiritual teacher or idea indicates that our understanding of discipleship is based on enslavement rather than freedom. Christians must cease being "Christians" in order to become, not Christ-like, but a Christ. Buddhists must cease being "Buddhists" in order to become, not Buddha-like, but a Buddha. True submission involves destroying the very objects, whether psychological or otherwise, that give birth to the various "isms" that promise liberation in the name(s) of enslavement.

Howe's writings were a reflection of what he himself derived from personal experience. His manner of expression was not designed to impress readers, but to relate to them. Ironically, it was Howe's ability to relate that separated him from many of the contemporary popular synthetic systems of eastern and western

psychology. Indeed, in Chapter 7, I will show that Howe's psychology was first and foremost a psychology of relationship, as opposed to being a psychology of synthesis; furthermore, I will demonstrate that Howe's psychology of relationship was the foundation for his praxis of psychotherapy.

E. Graham Howe was one of Alan Watts' teachers during the 1930's (Personal correspondence with John Heaton, March 2003). Howe's influence was reflected in Watts' *The Meaning of Happiness: The Quest for Freedom of the Spirit in Modern Psychology and the Wisdom of the East* (1940), *Psychotherapy East & West* (1961), and *In My Own Way: An Autobiography* (1965). In Watts' autobiography he wrote:

My self-constructed university next comprised the psychiatrist Eric Graham Howe, who then maintained consulting rooms on Harley Street and cozy living quarters in the mews behind, where I had lunch with him one day, consisting simply of a superb baked potato covered in butter...I was not his patient. He was simply a genial, dignified, and reassuring doctor who let me in on his mind. He had then written *I and Me* and *War Dance*, and was working on the principle that has always fascinated me – that the course of gravity is the way of energy. Once a week he hosted an intimate discussion group (Watts, 1965, p. 114).

Watts often informally met with Howe and participated in his weekly discussion groups, where Krishnamurti once made an appearance. Some of Watts' most important ideas can be traced to Howe's influence. For instance, Howe's idea that "the course of gravity is the way of energy" is evidenced in Watts' reflections on psychotherapy, acceptance, happiness, and liberation.

For the most part, then, Howe's influence has been confined to the likes of Alan Watts and other "fringe" philosophers and psychologists. This is due to the

fact that Howe was grouped with those who were considered “esoteric” or “mystical.” While there is certainly a powerful element of mysticism in his works, Howe was not mystical in the sense that he advocated an approach to psychotherapy that involved a specific set of yogic or meditative techniques. Rather, Howe was mystical in the sense of his attitude *toward* psychotherapy. Alan Watts and the infamous occultist, Aleister Crowley renounced psychotherapy in favor of meditation, yoga, and/or alchemy. Like Jung, however, Howe could not side with this position as it promotes a kind of *via negativa* that shortcuts acceptance. Jung (1976) wrote:

With the imitative and a positively morbid avidity to possess themselves of outlandish feathers and deck themselves out in this exotic plumage, far too many people are misled into snatching at such “magical” ideas and applying them externally, like an ointment. People will do anything, no matter how absurd, in order to avoid facing their own souls. They will practice Indian yoga and all its exercises, observe a strict regimen of diet, learn theosophy by heart, or mechanically repeat mystic texts from the literature of the whole world – all because they cannot get on with themselves and have not the slightest faith that anything useful could come out of their own souls (CW:12, p. 101).

Howe viewed meditation, yoga, and alchemy to be attitudes that help us transform the pathological “maps of life” that contribute to much undo pain and suffering. Howe’s psychotherapy, his *via positiva*, was not an “ointment” that supported avoidance, nor was it a surgical knife designed to remove the supposed “cause” of pain, but a *temenos* that allowed for the soul’s own yoga and alchemy to take place through surrendering to that which is unknown.

And what of Howe's "disciples"? Obviously, he had no followers in the sense that Freud or Jung did. Yet, Howe and Laing were good friends from 1960-1965. However, Howe disapproved of Laing's experimentation with psychedelics. As a result, in 1965, Howe "demanded Laing's resignation from the directorship of the Langham Clinic, ending what had been a sustaining friendship for both" (Burston, 1996, p. 61). Howe rejected Laing's personal experimentation with drugs because he felt it to be both irresponsible and excessive. Yet, Laing's use of LSD with his patients was not irresponsible. During the 1960's, along with Abram Hoffer, Humphry Osmond, Timothy Leary, Gordon Alpert (Ram Das), Alduous Huxley, Stanislav Grof, and many others researchers throughout Europe and especially North America, Laing was interested in LSD-assisted psychotherapy. Most of the LSD-assisted psychotherapy studies during the 1960's were conducted under scientifically controlled conditions. As a result, many techniques of LSD-therapy were developed such as, Psycholytic therapy, Psychedelic therapy, Anaclitic therapy, Hypnodelic therapy, and Aggregate LSD-psychotherapy (<http://www.druglibrary.org/schaffer/LSD/grofhist.htm>).

According to Andrew Feldmar (2001) in his article, "Entheogens and Psychotherapy," Laing, unlike Grof and the vast majority of the LSD-assisted psychotherapy researchers in the 1960's who preferred to direct their patients' attention inward, Laing liked to explore the psychological space between he and his patients by participating in the session (<http://www.janushead.org/4-1/feldmar.cfm>). In his own practice psychotherapy, Howe too explored the

psychological space between he and his patients by becoming a participant. Yet, it is likely that Howe's relationship with Krishnamurti led him to the conclusion that psychedelics and other consciousness altering substances ultimately offered the patient a "better furnished prison" rather than true liberation, even though he and Laing were both interested in the shared experience of the *between* in the psychotherapeutic relationship.

Howe was unjustly dismissed by the psychoanalytic community of his time, and his work, for the most part, is ignored to this day. When I mention to my colleagues that I am writing my dissertation on E. Graham Howe, I am usually met with the response, "E. Graham Who?" In turn, I reply, somewhat jokingly, "No, E. Graham Howe." Prior to being introduced to Howe's work two years ago, I, too, did not recognize Howe's name. This begs the question, How does an analytically oriented psychotherapist in the 1930's, 40's, and 50's who followed the Buddhist monk Nyanaponika Thera, influenced Alan Watts and R.D. Laing, wrote about the psychology of the druid, and talked with Krishnamurti go unrecognized? All that he had to do was to follow a Buddhist monk, influence Alan Watts, R.D. Laing, and their "kind," write about druidism, and talk with Krishnamurti.

For Howe, psychotherapy was a way of life. He felt that the best therapists were those "who are most prepared to burn their boats; the worst were those who when under pressure feel inclined to burn their passengers, especially when they seem to want to rock the boat." Howe did not condemn psychoanalysis, but rather, refused to put his patients through the psychoanalytic filter when he felt that it

would be detrimental to his patient's welfare. He was a gifted analytically oriented therapist who was deeply committed to the well-being of his patients. And, he was willing to "burn his own boat," and thereby sink into obscurity for the sake of his "passengers."

While I may have painted a picture of Howe as a kind of heroic figure, the picture is for the most part authentic. Yet, the picture also has its shadow side. It is true that Howe has not only been left out of the history of psychoanalysis, but also the history of psychology. But, Howe contributed to his own neglect by not fully entering into dialog with the various schools of psychoanalysis and psychology. By providing little in the way of historical context to his writings, by not referencing many of his sources, by his reluctance to speak the "language" of many of his contemporaries, and even by his refusal to join the British Psychoanalytic Society simply because he felt Ernest Jones to be "shifty," all added to Howe's historical obscurity.

Because of Howe's uninhibited eclecticism, because both the psychoanalytic and psychological literatures have ignored his work, and because he contributed to his own posthumous neglect, it is necessary to write a comprehensive survey of Howe's writings. Such a survey would demonstrate the depth of his thought, as well as address, for example, his ambivalent relationships with Freud, Jung and their followers; his relationship to existential phenomenology; and his relationship to Asian philosophy. Howe utilized existential phenomenology and Asian philosophy to elucidate the nature of his

ambivalence as well as to critique the doctrinaire approach of many analytically oriented psychotherapists of his day. Moreover, Howe took hold of the very spirit of his ambivalence as a means to propel him toward a profound exploration of the human psyche, an exploration that often led him outside the realms of psychoanalysis and analytical psychology. Howe's clinical insights, derived from psychoanalysis, phenomenology, existentialism, Asian philosophy, etc., "express that which all schools seek to express" (Howe, 1965, p. 10). Whether the school is Psychoanalysis, Zen Buddhism, Vedanta, or Existentialism, Howe used the imagery and language of each so as to point toward the art of healing in all.

PART II

E. Graham Howe's Place in the History of Psychodynamic Psychology

CHAPTER 2

Situating Howe

Howe's core psychological concepts can be compared and contrasted with those of better-known theorists such as, Freud, Adler, Jung, Klein, Winnicott, and Laing. Such comparisons highlight Howe's remarkable ability as a theoretician and practitioner of psychodynamic psychology by relating him to better-known figures who made an indelible mark on psychoanalysis. I will also compare and contrast Howe with the early twentieth century Scottish psychiatrist Ian Suttie whose *The Origins of Love and Hate* (1999) exerted an influence on John Bowlby, as well as influenced many of Howe's reflections on the psychology of love. In addition, I will situate Howe in relation to the wisdom traditions of Advaita Vedanta, Buddhism, and Gnosticism, Meditation, Phenomenology, and Existential Philosophy. By so doing, I will demonstrate Howe's facility for weaving multiple theoretical perspectives and traditions into a coherent whole, without diluting any one perspective or tradition in an effort prove his own hypotheses. Moreover, I will show that Howe's psychology was a psychology of relationship rather than a psychology of synthesis.

Howe's work can be situated within the history of psychodynamic psychology via Daniel Burston's typology of psychoanalytic theorists in *The Legacy of Erich Fromm* (1991). Burston's typology contains four basic clusters: 1) Orthodox Psychoanalysis, including analysts such as Ernest Jones, A.A. Brill,

Edward and James Glover, James and Alix Strachey, and Karl Abraham; 2) The Loyal Opposition, including psychologists and psychiatrists such as Ludwig Binswanger, Sandor Ferenczi, Wilhelm Reich, and Charles Rycroft; 3) The Crypto-Revisionists such as Erik Erikson, Melanie Klein, D.W. Winnicott, and Jacques Lacan; and 4) The Dissident Fringe such as Alfred Adler, Carl Jung, Ian Suttie, Otto Rank, and the later Karen Horney.

Orthodox psychoanalysts pride themselves on their personal loyalty to Freud. Moreover, they construe unwavering fidelity to Freud as evidence of intellectual depth or sophistication, and tend to imagine that the more “orthodox” analysts are (in terms of their attitude toward Freud), the more insightful they are in terms of their understanding of psychoanalysis.

By contrast, the “loyal opposition” is comprised of analysts whose loyalties to Freud prompted them to stay within the organizational framework of psychoanalysis, despite disagreements with Freud on important issues (Burston, 1991, p. 2). Theorists in the “loyal opposition” are quite candid about their revisionist agendas, but retain a great deal of what Burston calls, “Freud piety.”

The “crypto-revisionists,” by contrast, depart from orthodoxy, while insisting that their innovations are logical or necessary extensions of Freud’s core concepts. Thus, they claim allegiance to Freud, but, when a candid reckoning is made, they depart from orthodoxy in fundamental ways. According to Burston, crypto-revisionists “frequently try to outdo each other in declarations of fidelity to Freud - partly to legitimate their positions, and to avert the wrath of the orthodox,

and partly as a kind of self-deception that permits them to innovate freely without a bad conscience” (Personal Correspondence, June 2003). In reference to the “dissident fringe,” members of this group are often disenchanted Freudians, who after a period of apprenticeship, languished briefly in opposition but were either expelled or felt constrained to leave or start their own schools (Burston, 1991, p. 3).

By making a theorists’ personal stance toward Freud the chief or defining criterion for classifying analytic theorists, Burston is able to avoid the numerous pitfalls associated with a content-based typology. In terms of the typology’s origin and development, Burston notes:

I began thinking about ways of grouping analytic theorists in terms of some underlying (or overarching) affinities in the late 1980's, ...And the more I thought about it, the more I despaired of developing a serious content-based typology. Psychoanalytic theory is so densely complicated. On some level, all the major theorists are unique! Basing elective affinities on one, two or three doctrinal similarities or convergences would yield so many little "grouplets" - like Ptolemy's endless epicycles. Classifying these thinkers according to their emotional relationship/stance toward Freud got around those problems, and though it occasionally makes for strange bed-fellows - Erikson, Lacan and Klein as "crypto-revisionists", for example - it is not arbitrary or fanciful, but based on real similarities (Personal Correspondence, May 2003).

As Burston asserts, a content-based typology would be much too unwieldy for purposes of historical research. If a content-based typology were attempted, one would need to specify in advance the doctrinal and conceptual themes around which the respective theorists would be clustered. In order for such a typology to be possible, it would have to condense and edit the conceptual apparatus of each

theorist to such a degree that the results would no longer follow from the premises. Alternatively, one would have to classify many theorists in several categories at once, depending on which issue or cluster of issues were emphasized. While this may yield interesting results, it does not help much in understanding each theorist's unique place in the history of psychodynamic psychology. A typology based on a psychologist's/psychiatrist's personal stance toward Freud not only situates the theorist in terms of his attitude toward orthodox psychoanalysis, but affords us the opportunity to flesh out the theorist's own contribution(s) in ways that are sensitive to context, as well as to content; to rhetoric, as well as science.

While emphasizing the individual theorist's personal stance toward Freud, Burston's typology of psychoanalytic theorists raises the question as to why some psychologists in the "dissident fringe" went on to develop schools and others did not. For instance, why did Jung go on to develop the school known as "Analytical Psychology" while E. Graham Howe drifted into obscurity?

As indicated earlier, Howe was anti-systematic and shunned conventional disciples. At first glance, it may seem that Howe's anti-systematic stance placed him in a somewhat adversarial relationship to Freud and orthodox psychoanalysis, thus excluding him from the history of psychodynamic psychology. However, such a characterization erroneously assumes that psychoanalysis is a finished system, or that being psychodynamic and being anti-systematic are mutually exclusive.

That being so, Howe can be situated within the “dissident fringe” of Burston’s typology, provided that it is expanded to include those theorists on the remote boundaries of the “dissident fringe” such as R.D. Laing and E. Graham Howe, who did *not* start their own schools.

Why situate Howe within the “dissident fringe” of psychoanalysis? Why not situate him in the history of psychotherapy generally? Because of the protean and eclectic nature of Howe’s thought, he could be situated in either way. Howe abhorred the hegemony of psychoanalytic theory in his day; therefore, it might be reasonable to situate him within the general history of psychotherapy. Yet, psychoanalysts and Jungians primarily influenced Howe. Moreover, Howe did not attack psychoanalysis or analytical psychology *per se*. Rather, he attacked the orthodox, dogmatic way in which each school was promulgated. Situating Howe within the broad history of psychotherapy runs the risk of de-contextualizing him somewhat. By situating Howe within the “dissident fringe” of Burston’s typology, his (ambivalent) relationship with Freud, Jung, and their followers can be clarified, lending additional relevance to the comparisons with Adler, Suttie, Winnicott, and Laing, that follow. And, as Howe drew upon deeply various spiritual traditions to illustrate his approach to clinical practice, it is important to list and describe these sources.

While Freud was certainly a contemporary of Husserl, it may prove to be beneficial, methodologically speaking, to situate psychoanalysis in relation to existential-phenomenology, as Howe, throughout his life and works, continuously

dialogued both traditions in an effort to show the dialectical relationship between the two. Yet, because Howe often vacillated back and forth between a plethora of traditions that are culturally and chronologically divergent, in my explication of Howe's sources, I will shift from one tradition to the next, expressing the continuity and flow that exists between the respective traditions, while simultaneously being sensitive to both culture and chronology, but letting each tradition stand on its own without endeavoring to artificially construct a unifying synthesis. Hence, in addition to explicating Howe's relationship to psychoanalysis, I will cite various philosophical and religious traditions, as follows:

Vedanta

As a lump of salt dropped into water dissolves with water,
and no one is able to pick it up, but from
wheresoever one takes it, it tastes salt, even so,
my dear, this great, endless, infinite Reality is but Pure Intelligence.
Brihadaranyaka Upanishad

Literally, the word "Vedanta" means, "the culmination or end of the *Vedas*." The *Vedas* are one of the most sacred scriptures of the Hindu religion, along with the *Upanishads* and the *Bhagavad-Gita*. They comprise hymns to various deities that date back to about 2500 B.C. Most of the Vedic hymns that were composed at that time indicate that the ancient Hindus practiced a form of polytheism. However, many of the hymns also suggest that monotheism was practiced as well. Vedanta is not strictly limited to the *Vedas*, despite the fact that its spiritual practices were based primarily on the ancient hymns. Vedanta is

based on the teachings of multitude of Indian sages that span approximately 5000 years. Vedanta is predicated on the following principles:

1. The ultimate truth (divine) constitutes a single unity, despite the fact that it is worshipped and venerated in a multitude of forms. If the ultimate truth signifies a single unity, despite its variations based on culture and religion, then that which we call Yahweh, Jehovah, Krishna, or Allah is One. In Vedanta, the concept of Oneness implies a necessary unity. In Vedanta, words such as “truth,” “God,” “the Divine,” and “ultimate reality” are synonymous with the Sanskrit word *Brahman*. Most schools of Vedanta assert that *Brahman* is divided into two aspects: *Nirguna Brahman* and *Saguna Brahman*. *Nirguna Brahman* stresses the Ultimate Truth which exists and pervades through the Universe. It is considered to be without *any* form, impersonal, and thus, cannot be known through the senses, as it possesses no attributes. *Saguna Brahman*, on the other hand, is personal, God, or Supreme Consciousness with attributes, and hence, can be known through its attributes (http://en.wikipedia.org/wiki/Saguna_Brahman).

2. According to the teachings of Vedanta, humankind, essentially, is one with the Divine. This “supreme identity” is not evident, grasped, or made conscious due to ignorance. In essence, we *forget that we are fundamentally one with God*, and mistakenly identify with an individual self (or “ego”) that is deemed separate from Ultimate Reality.

3. Since we forget our fundamental identity with Ultimate Reality or *Brahman*, the goal of sentient existence is to dis-identify with our separate self-

sense and become aware or conscious of *Brahman*. This is akin to “God Consciousness,” the awareness of the illusory nature of the self and all of its modes of perception, and simultaneously, the consciousness of one’s true identity as the Divine.

4. Through the practice of various forms of Yoga and/or meditation, God consciousness can be attained.

The fundamental truths of Vedanta, according to the Vedanta Society, were best exemplified in the lives and teachings of the 19th Century Bengali Sage Sri Ramakrishna (1836 – 1886) and his Indian disciple Swami Vivekananda (1863 – 1902). Vivekananda founded the Vedanta Society of New York in 1894. He was also the first teacher to introduce the philosophy and spirituality of Vedanta to the western world. At the Conference of Religions in Chicago in 1893, Vivekananda presented to the western world the essential teachings of Vedanta for the first time. Because the attendees were so struck by Vivekananda’s eloquence and powerful presence, he was urged to stay in North America and Europe from 1893 – 1900 to lecture on and teach the philosophy and spirituality of Vedanta. His speeches, principal essays, poems, and meditations on Yoga can be found in his Nine-Volume *Complete Works* (Vivekananda, 1947). The teachings of Sri Ramakrishna can be found in his famous text *The Gospel of Sri Ramakrishna*, which was first published in 1942 (Nikhilananda, 1985). *The Gospel of Sri Ramakrishna* (1985) exerted a profound influence on Alduous Huxley, Mahatma Gandhi, and Thomas Mann, to name a few.

Ramana Maharshi (1879 – 1950) was also a famous teacher of a particular school of Vedanta, known as Advaita (non-dual) Vedanta. The basic tenets of Advaita Vedanta are based on the commentaries on the *Vedas*, *Bhagavad Gita*, *Upanishads*, and *Brahma Sutras* written by the Hindu sage Shankara, who lived some time between the 7th and 8th Century A.D.

The essential identity of the individual self and Supreme Identity (*Brahman*) is the most important tenet of Advaita Vedanta. *Brahman*, as the Supreme Identity, Absolute Truth, and Ultimate Reality, is the fundamental basis or foundation through which all transient phenomena are experienced. It is also the Divine Presence, Krishna, Vishnu, God who lives within all sentient beings. According to the teachings of Advaita Vedanta, what is commonly referred to as the *Atman*, or True Self, is identical to *Brahman*. Advaita philosophers assert that for the senses *Nirguna Brahman* is viewed as *Saguna Brahman*, and is commonly worshipped in the form of a deity, i.e., *Vishnu*, *Shiva*, or *Devi* (http://en.wikipedia.org/wiki/Saguna_Brahman).

All of the different schools of Vedanta are predicated upon the principle of non-duality; however, Advaita Vedanta, as taught by both Shankara, and especially Ramana Maharshi, is perhaps the most insistent in its emphasis on the primacy of the essential unity between *Atman* and *Brahman*. Thus, *Atman* consciousness, as mode of perception, sees, hears, and experiences only the True Self in all of its various manifestations in the phenomenal world. When asked why duality is perceived in this world, advaita has a multi-pronged answer.

According to Shankara's commentaries as well as the teachings of Ramana Maharshi, the manifold phenomena of creation are the result of *Maya*, which is the manifest world that is wielded by God, who is therefore referred to as the *Mayin*. We perceive duality, the separation between mind and body, self and world, ego and other, individual consciousness and absolute consciousness, due to *avidya* (ignorance). Ignorance is due to the fact that the individual, who is identified with his personal ego, is not aware of his fundamental rootedness in *Atman*, or *Brahman*. When ignorance is removed, both the individual ego and the manifest world, as products of *maya*, dissolve into the unity of *Atman*. Self-Knowledge leads to true liberation from duality and from the illusory identification with the individual or personal ego, which is the source of pain, suffering, and even death.

Buddhism

The Buddha was born approximately 2500 years ago in what is now known as Nepal. He was a prince and lived a life of wealth, pleasure, and luxury. At the age of 29, he realized that a life predicated upon the pursuit of such pleasure could not lead to true happiness. As a result, the Buddha left his father's palace, his wife and newborn son, and became a wandering monk, dedicating the next six years of his life to various meditative and yogic practices.

At age 35, he came to a place called *Bodhi Gaya* and sat under a tree. He vowed not to move from that spot until he attained full awakening. As the Buddha meditated, he came to understand the nature of existence and a path that led to release from the inherent suffering we all experience. He also saw that we are all

born many times, and that the conditions we are born into depend on our deeds - good actions leading to happy states, bad deeds leading to unhappy ones. He also realized that the idea of a permanent self or soul was an illusion.

According to Buddhist tradition, for the next 45 years or so, the Buddha lived as a wandering monk, amassing many disciples. He died at the age of eighty.

The Four Noble Truths

The foundation for any thorough understanding of what it means to be a Buddhist or to practice Buddhist meditation, ethics, and/or spirituality, begins with the Buddha's reflections and instructions on what became known as the Four Noble Truths. When Buddha was immersed in a life of pleasure and the prompt gratification of every one of his carnal desires, his reflections led him to the conclusion that, no matter how pleasurable the experience associated with the fulfillment of desire, attachment to such experiences only leads to immense suffering. Thus, the phenomenal world, according to the Buddha, is a place of pain and anguish, not because the world, in and of itself, was wrought with pain, but because attachment to such transitory phenomena leads to an intense craving and desire; life becomes centered on the pursuit of something illusory, and most importantly, fundamentally unsatisfactory. The Buddha believed that the acquisition of such temporary pleasure was ultimately futile, and did not lead to true liberation.

1. According to the Buddha, the first noble truth is that all sentient beings suffer. Suffering is an inevitable component of every transient pleasure and

individual existence. As the Buddha reflected and meditated on this first noble truth, he was led to explore the possible causes for suffering. What is the root of suffering, from the Buddha's perspective?

2. The Buddha's second noble truth is that suffering is a result of craving, or self-centered, egoic desire. Ultimately, according to the Buddha, this craving, or egoic desire, is connected with the goal of creating and subsequently manifesting the illusion that the basis of one's individual identity is a permanent, non-transitory self that resists the fluctuations and ebb and flow of time, a self that is not subject to change.

3. The Buddha's third noble truth is that there is ultimately a path that leads to the cessation of suffering. Unlike Christianity and Islam, the cessation of suffering is not realized when one's temporal-spatial existence comes to an end. Hence, Liberation is not attained in the afterlife, or due to unwavering allegiance to a particular deity. Rather, liberation can only pertain to the present moment, i.e., in one's "earthly", or phenomenal existence. The cessation of suffering can be attained by following the path, or way, that leads to its inevitable cessation.

4. The Noble Eightfold Path is the Buddha's Fourth Noble Truth. It is the path that leads to what Buddhists refer to as *nirvana*, or enlightenment. The eight components to this path are: right understanding, right thought, right speech, right action, right livelihood, right effort, right mindfulness and right concentration. Each component is integrally related or interconnected with the other. In sum, it is a path that leads to the development of a profound ethic of compassion and mercy,

it is a way that leads to the gradual expansion of awareness, and ultimately, it is the vehicle through which liberation is realized and subsequently manifested in the present moment.

The Four Foundations of Mindfulness

The Buddha's teaching on The Four Foundations of Mindfulness, outlined in *Sutta Satipatthana*, is of the utmost importance for Buddhist meditative practice, regardless of the particular Buddhist school. The best way to understand the Buddha's use of the word "mindfulness" is to indicate that it closely approximates to what Freud termed "evenly hovering attention." The purpose for practicing mindfulness is to perceive phenomena without either attachment or aversion.

According to the *Sutta Satipatthana*, the Buddha taught his disciples (both lay and monastic) to practice mindfulness in four fundamental ways, whereby each way or practice is dedicated to the contemplation of a particular category of phenomena.

The four contemplative practices are: 1. contemplation of the body, which is designed to aid the practitioner in the gradual awareness that the body, like all other transient phenomena, is ultimately impermanent, i.e., that it is subject to birth, decay, and death; 2. contemplation of feelings, whereby the meditator directs the focus of their awareness on the arising and falling of particular feelings states, noting their specific nature and function, i.e., is the feeling that appears before my conscious awareness at this very moment positive, negative, neutral, pleasant, unpleasant, etc. The particular feeling is contemplated from a detached perspective, in the sense that the meditator does not identify with the feeling that is

being manifested. By so doing, the feeling is noted to be impermanent, in that it has its beginning and end, it arises and falls, it appears and then disappears; 3. contemplation of the mind, which guides the meditator toward the observation of his own state of mind. In essence, the meditator becomes conscious of whether his (or her) mind is attached or repulsed by various thoughts, concepts, abstractions, desires, etc. All of the various states of mind, whether positive or negative, pleasure producing or conducive to pain, are impermanent, and thus not solidified as part of the foundation for the meditator's own psyche; 4. contemplation of mental objects, which, according to the Pali scriptures, leads to the awareness that sensual desire, ill-will, sloth, restlessness, and doubt prevent the meditator from attaining enlightenment.

The Buddhist Scriptures: The Pali Canon, The Heart Sutra, The Diamond Sutra and the Lotus Sutra

The Pali Canon is comprised of three different textual categories. First there is the *Book of Discipline*, which includes a collection of monastic rules and guidelines that were dictated by the Buddha to his disciples. The second category consists of a collection of the Buddha's discourses. This collection is semi-autobiographical, in that the Buddha provides detailed accounts of his nirvana, as well as instructions on meditative practice. The third category contains what are commonly referred to as the *Higher Teachings*, where the Buddha outlines his

understanding of the mind. The *Higher Teachings* contain discourses that focus specifically on Buddhist psychology².

The *Heart Sutra* was written some time during the first century BCE. Despite the fact that it is only about a page long, it is arguably the most influential of all Buddhist texts. In the *Heart Sutra*, the Buddha expounds his understanding of “emptiness.” The Buddhist notion of emptiness is perhaps the most important, yet simultaneously, most misunderstood. “Emptiness” refers to the fact that individual phenomena do not exist separately. In essence, the entirety of the cosmos, with all of its aggregates, forms, and individual manifestations, only exists as a tapestry of inter-related components. In his commentaries on the *Heart Sutra*, the Vietnamese Zen master Thich Nhat Hanh asserted that within a single tree lies the entirety of the universe. Emptiness, then, refers to the notion that all phenomena are empty of any individual existence or essence, on account of each phenomenon, being, paradoxically, full of existence.

In the *Diamond Sutra*, the Buddha, in a fashion similar to the teachings of the great sages of Vedanta, concluded that a self, which is predicated on an independent, individual existence--, an existence that is based on a self-enclosed identity, an identity that is overtly identified with the various manifestations of thought, feeling, and emotion that arise within the spectrum of conscious awareness, -- can only function in an illusory world. Thus, such a self, from a

² Howe’s Buddhist teacher, Nyanaponika Thera, wrote extensive commentaries on the *Higher Teachings*. Thera’s commentaries and reflections were collected in his book *Abhidhamma Studies* (1998).

Buddhist psychological perspective, is a delusion and not based in reality. It is only assumed to be substantial as a result of a consensus reality that functions as a kind of mass hysteria, whereby the majority of sentient beings engage in a cosmic play of appearances and partake in fleeting interchanges of what is presumed to be relationships.

The *Lotus of the True Dharma Sutra* was written in Sanskrit and, along with the *Heart Sutra* and *Diamond Sutra*, is one of the most influential of all Buddhist scriptures. It was probably written between 100BCE and 200CE. In this collection of teachings, the Buddha demonstrated his ability to adapt not only the style of his presentation, but the teachings themselves to speak specifically to the level of his audience.³

The Major Buddhist Traditions

The Theravada Tradition:

“In the Buddhist countries of southern Asia, there never arose any serious differences on the fundamentals of Buddhism. All these countries - Sri Lanka, Cambodia, Laos, Burma, Thailand, have accepted the principles of the Theravada school and any differences there might be between the various schools is restricted to minor matters. The earliest available teachings of the Buddha are to be found in Pali literature and belong to the school of the Theravadins, who may be called the most orthodox school of Buddhism. This school admits the human characteristics

³Howe’s own jargon-free style was also a kind of adaptation. Howe expressed himself in a manner similar to the Buddha’s style in the *Lotus Sutra*. Howe and the Buddha, dialogued with (rather than dictated to) their respective audiences.

of the Buddha, and is characterized by a psychological understanding of human nature; and emphasizes a meditative approach to the transformation of consciousness. The teaching of the Buddha according to this school is very plain. He asks us to 'abstain from all kinds of evil, to accumulate all that is good and to purify our mind'. These can be accomplished by The Three Trainings: the development of ethical conduct, meditation and insight-wisdom. The philosophy of this school is that all worldly phenomena are subject to three characteristics - they are impermanent and transient; unsatisfactory and that there is nothing in them which can be called one's own, nothing substantial, nothing permanent. All compounded things are made up of two elements - the non-material part and the material part. They are further described as consisting of nothing but five constituent groups, namely the material quality, and the four non-material qualities - sensations, perception, mental formatives and consciousness. When that perfected state of insight is reached, i.e. *Nibanna*, that person is a 'worthy person' an Arhat. The life of the Arhat is the ideal of the followers of this school, a life where all (future) birth is at an end, where the holy life is fully achieved, where all that has to be done has been done, and there is no more returning to the worldly life” (<http://www.buddhanet.net/e-learning/history/b3schthe.htm>).

The Mahayana Tradition

“The Mahayana is more of an umbrella body for a great variety of schools, from the Tantra school (the secret teaching of Yoga) well represented in Tibet and Nepal to the Pure Land sect, whose essential teaching is that salvation can be

attained only through absolute trust in the saving power of Amitabha, longing to be reborn in his paradise through his grace, which are found in China, Korea and Japan. Ch'an and Zen Buddhism, of China and Japan, are meditation schools. It is generally accepted, that what we know today as the Mahayana arose from the Mahasanghikas sect who were the earliest dissidents, and the forerunners of the Mahayana. They took up the cause of their new sect with zeal and enthusiasm and in a few decades grew remarkably in power and popularity. They adapted the existing monastic rules and thus revolutionized the Buddhist Order of Monks. Moreover, they made alterations in the arrangements and interpretation of the Sutra (Discourses) and the Vinaya (Rules) texts. And they rejected certain portions of the canon, which had been accepted in the First Council. According to it, the Buddhas are *lokottara* (supramundane) and are connected only externally with the worldly life. This conception of the Buddha contributed much to the growth of the Mahayana philosophy. The ideal of the Mahayana school is that of the Bodhisattva, a person who delays his or her own enlightenment in order to compassionately assist all other beings and ultimately attains to the highest Bodhi” (<http://www.buddhanet.net/e-learning/history/b3schmah.htm>).

The Vajrayana Tradition

“This is the kind of Buddhism predominant in the Himalayan nations of Tibet, Nepal, Bhutan, and also Mongolia. It is known as Vajrayana because of the ritual use of the *vajra*, a symbol of imperishable diamond, of thunder and lightning. At the center of Tibetan Buddhism is the religious figure called the

lama, Tibetan for "guru", source of another of its names, Lamaism. Several major lineages of lamas developed, beginning in the ninth century with the Nyingma-pa. Two centuries later, Sarma-pa divided into the Sakya-pa and the Kagyu-pa. Three hundred years later, one of Tibet's revered lamas, Tsong-kha-pa, founded the reforming Gelug-pa" (<http://www.buddhanet.net/e-learning/history/b3schvaj.htm>).

Meditative Awareness

Meditation is both a practice and a philosophy of life. For Howe (1989), meditation is both a "state of mind" and "way of life" (pg. 62). It is a practice in so far as it is something to be repeated, and it is repeated for the purpose of cultivating the awareness of "diversity within unity, or multiple dualities sprung from non-duality" (Howe, 1989, pg. 62). It is a philosophy, or way of life because it is a way of understanding one's relationship to the world. Often in meditative practice one is required to "sit on the ground," "straighten the back," and "focus the attention." Hence, posture becomes all important in the meditative experience: "The posture we take when we meditate signifies that we are linking absolute and relative, sky and ground, heaven and earth, like two wings of a bird, integrating the sky-like deathless nature of the mind and the ground of our transient, mortal nature" (Trungpa, p.7, 1998). It is not that we are linking together two things that are separated; rather we are becoming aware that "heaven" and "earth" were never separate in the first place.

Meditation is bringing the mind home. The whole of meditation practice can be condensed into three points: bring your mind home, release, and relax

(Trungpa, p. 7, 1998). To *bring your mind home* means to bring the mind back to the present moment. To *release* means to release the mind from its prison of grasping, since all suffering is understood as an attachment, or an identification of the mind, with a transient phenomenon. To relax means to relax the mind of conflict, struggle, and tension, to permit the mind to be spacious, like the open-sky, while at the same time remaining grounded.

Buddha was once asked, “Are you a god?” “No,” he replied. “Well, are you a man?” “No,” he answered. Finally, he was asked, “Well, what are you then?” He replied simply, “I am awake.” The word “Buddha” means to awaken. *How* to awaken is the only thing the Buddha taught. Meditation can be thought of as the art of awakening (Kornfield, p.17, 1998). Does this imply that human beings have been in some way “asleep?” Does being “asleep” contribute to unnecessary suffering? Moreover, what does it mean to “awaken from sleep?” And, to “what” is the meditator awakened?

There are many different ways to explain the “art of awakening.” Meditation is a manner of self-engagement and a practice that brings the process by which tension is produced and maintained to awareness. Meditation, for others, is a way to increase self-consciousness; a systematic method designed to reduce anxiety and depression. However, meditation is first and foremost a way for the practitioner to gradually increase her awareness until she “transcends” her ego, by divesting herself of illusory identifications and attachments. “Transcending,” therefore, means dis-identifying with so-called weaknesses and faults that paralyze

and restrict awareness. This is akin to saying, “I have faults and weaknesses, but I am not my faults and weaknesses” (Assagioli, 1965, p.117). By dis-identifying with, not only faults and weaknesses, but our entire intellectual, emotional, and bodily “lives,” we gradually allow the contents and operations of the mind, the body, and our emotions to be witnessed, or observed, without attachment. In meditation, each phenomenon, positive or negative, will arise and pass away before Mind-the-Witness that witnesses the temporal, impermanent nature of the phenomenal world.

Meditative practice is a process whereby the practitioner becomes increasingly aware of the timeless and transpersonal Witness that constitutes the very ground of Being. The Witness is the Seer who sees, but is never seen. It is the Hearer that hears, but is never heard. And, it is the Thinker who thinks, but is never thought. Similarly, in *Cure or Heal?*, Howe wrote that “the Self is Seeker and should not be sought; it is subject, not object...the aim is therefore to experience Self as not-self” (1962, pg. 201). The Witness (Self) is Yahweh, Allah, Christ, Brahman, and Krishna, the Other like no other, as well as the indeconstructable space in which everything is deconstructed. In Howe’s very own poetic, phenomenological, and poignant description:

“The aim of meditation is only to realise, re-discover and experience anew what has always been so, and ever must be so: the fact of our relationship of this with THAT, of “me” with “I”, and of each one with ALL. It is only as if we had forgotten and are seeking to remember...Meditation, therefore is a way of a way of unknowing by self-emptying” (1989, pg. 64).

Gnosticism

There is no one form of Gnosticism. Its central tenants were extracted from a wide variety of different, and at times, divergent philosophical, religious, and spiritual traditions. When studying the texts that have been labeled “Gnostic,” it is evident that many Gnostic beliefs were derived from Asian, Egyptian, Babylonian, and ancient Greek religions and philosophies. Moreover, the vast majority of the Gnostic tracts attempt an intricate synthesis of Asian, Egyptian, and ancient Greek philosophy (especially Plato) with Jewish and Christian symbolism, and in due course with Islam as well.

With the exception of the *Pistis Sophia* and a few others, the majority of the Gnostic texts were not discovered until 1945. Among the scrolls discovered at Nag Hammadi were: *The Gospel of Thomas*, *Gospel of Truth*, *Treatise on the Resurrection*, *Gospel of Philip*, *Wisdom of Jesus Christ*, *Revelation of James*, *Letter of Peter to Philip*, and *On the Origin of the World*, among others. Scholars of Gnosticism, such as James Robinson, indicate that the Gnostic texts were written in Greek during the second and third centuries CE, and then translated into the Coptic language in the 4th Century CE (Robinson, 1990).

Gnostic Beliefs

Knowledge: According to the Gnostics, knowledge is not simply information, or something one has or gains through the study of spiritual, philosophical, religious, and/or psychological literature. Rather, as gnosis is a transformative insight akin to what Christians call an epiphany, or what the

Vedantists refer to as *moksha*, or liberation. Like his Vedantic counterpart, the Gnostic adept liberates himself from illusory identification with the phenomenal world and all of its appearances, manifestations, and configurations.

God: However, unlike Vedanta, in which the Absolute is everywhere, indwelling, and so on, the God of Gnostic philosophy and spirituality is utterly transcendent. According to Gnostic cosmologies, this supreme deity created many subordinate deities who have supernatural powers and abilities, but are nonetheless finite entities. One of these finite deities is the feminine deity referred to as Sophia. Sophia, who was a virgin, miraculously gave birth to a much inferior Creator-deity known as the Demiurge (Barnstone, 1984). The Demiurge, which is often equated with the creator God of the Book of *Genesis*, created the earth and all of its manifest forms of life. From a Gnostic perspective, the Demiurge is jealous, callous, unkind, uncompassionate, selfish, prideful, ignorant, and most importantly, believes himself to be the Supreme Being. The Gnostics believed that, as a result of the Demiurge's attempt to imitate the Supreme Being, he, in turn, gave birth to the pain, suffering, and evil that exists in the world.

Phenomenology

Phenomenology is the study of how various phenomena appear within the spectrum of human experience, and the associated meanings given to the structure of how the phenomenon is experienced. Phenomenology is a diverse discipline, with a multiplicity of approaches and seven modes of phenomenological

investigation. *The Encyclopedia of Phenomenology* (1997) lists the seven basic types of phenomenology as follows:

“(1) Transcendental constitutive phenomenology studies how objects are constituted in pure or transcendental consciousness, setting aside questions of any relation to the natural world around us. (2) Naturalistic constitutive phenomenology studies how consciousness constitutes or takes things in the world of nature, assuming with the natural attitude that consciousness is part of nature. (3) Existential phenomenology studies concrete human existence, including our experience of free choice or action in concrete situations. (4) Generative historicist phenomenology studies how meaning, as found in our experience, is generated in historical processes of collective experience over time. (5) Genetic phenomenology studies the genesis of meanings of things within one's own stream of experience. (6) Hermeneutical phenomenology studies interpretive structures of experience, how we understand and engage things around us in our human world, including ourselves and others. (7) Realistic phenomenology studies the structure of consciousness and intentionality, assuming it occurs in a real world that is largely external to consciousness and not somehow brought into being by consciousness” (Dordrecht and Boston).

As a historical movement within philosophy, phenomenology was initiated in the beginning of the 20th century by Edmund Husserl, Martin Heidegger, Maurice Merleau-Ponty, Jean-Paul Sartre, and others.

In his *Logical Investigations* (1900-01) Husserl first presented his phenomenological theory of intentionality, relating it to mathematics, language, psychology, and science. Then in *Ideas I* (1913), Husserl developed what was his first general definition of phenomenology as a particular method of philosophical investigation. Phenomenology, for Husserl, was "the science of the essence of consciousness." In *Ideas I*, Husserl also shifted his "science of the essence of consciousness" toward what eventually proliferated into transcendental phenomenology, as distinct from other methods of phenomenological inquiry.

Integral to Husserl's phenomenological method is what is called the *epoché*, which is the practice of abstaining from projecting any preconceived notions or biases, whether philosophical, scientific, theoretical, psychological, etc., onto the thing being investigated. According to Husserl, phenomenology involves the practice of what he called "bracketing." As phenomenologists within the tradition of transcendental phenomenology, we "bracket" all of our preconceived notions and biases, which include the suspension of any judgment or definitive declaration in reference to meanings and significances based solely on abstractions. Instead, Husserl stated that we direct our attention to the very structure of consciousness itself. Thus, the fundamental question in transcendental phenomenology is not, "*What is the thing that appears?*" but, "*How does the thing appear before me right now?*" This question, in turn, leads toward the reflection that consciousness is always intentional in that it functions to point to a given thing.

In *Being and Time* (1927) Heidegger outlined his understanding of phenomenology, as distinct from Husserl. For Heidegger, we do not necessarily study human being by "bracketing" the world, as did Husserl. From Heidegger's perspective, human being is always in relation to the phenomenal world; thus he directed his attention toward studying how phenomena are contextually related. While for Husserlian phenomenology was transcendental in practice, Heidegger turned toward what he called "fundamental ontology." From a Heideggerian point of view, any investigation of human *beings* as individual phenomena is flawed without first asking the question as to the meaning of human *being*. Heidegger

referred to human being as “Dasein,” literally the “there” of being”, or “being-there.” While Husserl tended to direct his attention toward conceptual abstractions such as “consciousness” and “subjectivity,” Heidegger felt that the significance of Dasein’s relationship to phenomena could be discovered in the midst of practical, everyday activities.

In sum, Heidegger defined phenomenology as a method whereby phenomena are permitted to “show themselves as themselves,” in essence “to let that which shows itself be seen from itself in the very way in which it shows itself from itself.” While in *Ideas I* Husserl unfolded his transcendental phenomenology, Heidegger, in *Being and Time*, approached phenomenology from an existential perspective. Thus, Heidegger initiated what eventually became known as existential-phenomenology, which included an existential interpretation of the various modes of being human – time, death, authenticity, the uncanny, etc.

In *Being and Nothingness* (1943), Sartre developed his understanding of phenomenological ontology. While Heidegger tended to deviate from Husserlian phenomenology, Sartre basically restated Husserl’s fundamental premise that consciousness is intentional, with the exception that the self is not a centralized structure but merely an array or conglomeration of conscious actions and/or choices. According to Sartre, the phenomenon that appears in and before an individual consciousness is different from consciousness itself. Each phenomenon has being-in-itself, in that underlying each phenomenon is its pure facticity, its radical objectivity as a thing among other things. Consciousness, on the other

hand, has being-for-itself due to its capacity for self-reflection, which differentiates it from being-in-itself.

In *The Phenomenology of Perception* (1945) Merleau-Ponty demonstrated the importance of the body in human experience. While Husserlian phenomenology could be labeled as a phenomenology of consciousness and Heideggerian phenomenology as a phenomenology of Dasein, Merleau-Ponty's phenomenology could be considered to be a phenomenology of the body. Merleau-Ponty made the distinction between what he called the "lived" body and the physical body. Integral to Merleau-Ponty's understanding of the "lived" body is the notion that the mind and body are not separate as is the case in Cartesian philosophy. In the *Phenomenology of Perception*, Merleau-Ponty (2002) wrote:

"Consciousness is being-toward-the-thing through the intermediary of the body. A movement is learned when the body has understood it, that is, when it has incorporated it into its 'world,' and to move one's body is to aim at things through it; it is to allow oneself to respond to their call, which is made upon it independently of any representation" (pp. 138-139).

For Merleau-Ponty, consciousness is not divorced from the body. Also, it is not merely the reflection upon mental objects, objects abstracted from a world "exterior" to what traditional (intellectual) psychology would understand as the mind. Further, it (consciousness) is not simply awareness. Neither is it awareness in and of itself nor is it an awareness of some particular object or group of objects in a world that the "mind" comes, in some mysterious way, to "know." If consciousness were simply a "pure" awareness then we would have to explain how it is that we come to know it in the first place. Consciousness is always

moving toward the world, a world inhabited by things. “How does body-consciousness learn to respond to things?” Merleau-Ponty answers that we can only respond to the call of things by incorporating the movement toward the thing... “independently of any representation.” A response is not dependent on representing a response “in the mind” and then performing it as an action “in the world.” Rather, the response is the immediate action of the body-consciousness toward the world uninhabited by co-ordinates in a purely geometric space-time continuum.

To conclude this section, phenomenology investigates the structure and multiple meanings of experience, ranging from perception, thought, memory, time, death, imagination, emotion, desire, embodied action, love, the mind, the self, and all forms of social activity.

Existentialism

The term “existentialist” was used by Jean-Paul Sartre as a way to describe his philosophy as articulated in his magnum opus, *Being and Nothingness*, and his literary works, *Nausea* and *No Exit*. However, many of his associates during the 1940’s and 1950’s, were identified as existentialists, including Martin Heidegger, Karl Jaspers, Martin Buber, and Gabriel Marcel. Soren Kierkegaard and Friedrich Nietzsche, two 19th century philosophers, can be considered historical precursors to 20th century existentialism.

The vast majority of “existentialists” insist that the traditional philosophical categories that describe the “essence” or “substance” of human being have to be

discarded in favor of non-binary categories that demonstrate the subjectivity, contextuality, historicity, and relational aspect of being human. That being so, new philosophical categories and concepts that reorient philosophical inquiry toward a specifically human kind of existence, have to be developed. For instance, in the early part of the 20th century, Heidegger, in *Being and Time* (1996), used words such as, “Dasein” and “Being-in-the-world” and Sartre, in *Being and Nothingness* (1993) employed the terms “being-for-itself” and “being-for-others” to both existentially and phenomenologically describe the human kind of being.

Existentialists propose that new categorical structures have to be developed in order to understand the meaning of human being, but do not necessarily deny the validity and reliability of natural scientific modes of classification or reject moral and/or ethical principles. Rather, existentialism can be best understood as a philosophical school that based itself on the premise that philosophy cannot be practiced in a disinterested or detached fashion.

Perhaps the most unique feature of existentialism, the feature that separates existential philosophy from other philosophical schools, both ancient and modern, can be best captured by Sartre's slogan, "existence precedes essence." Philosophy since Plato and up until the 19th century philosophies of Kierkegaard and Nietzsche was for the most part concerned with describing the “essence” of a particular phenomenon. Thus, philosophers comprised systems based on typologies, with the goal of classifying entities according to what they believed to

be fixed properties. While this methodology may be useful in terms of classifying animals and inanimate objects in relation to the cosmos, describing static physical properties, i.e., to describe the non-human kind of being, it is not useful when talking about the uniquely human kind of being. Being human is decided through the individual act of existing; hence, no classification system, no formal typology can decide what it means to be human. The human kind of being is constituted by the very meaning of being. According to Kierkegaard in his *Concluding Unscientific Postscript*,

An existential system is impossible. An existential system cannot be formulated. Does that mean that no such system exists? By no means; nor is this implied in our assertion. Reality itself is a system...but it cannot be a system for any existing spirit. System and finality correspond to one another, but existence is precisely the opposite of finality (Bretall, 1973, pg. 201).

Howe's Major Works

Howe authored a total of thirteen books including *Motives and Mechanisms of the Mind* (1931); *Time and the Child* (1934); *I and Me* (1935); *War Dance* (1937); *Where This War Hits You* (1941); *The Triumphant Spirit: A Study of Depression* (1943); *Invisible Anatomy: A Study of Nerves; Hysteria, and Sex* (1944); *Mysterious Marriage: A Study of the Morality of Personal Relationships and Individual Obsessions* (1949); *The Open Way: A Study in Acceptance* (1950); *A Psychologist at Work* (1950); *Cure or Heal? A Study of Therapeutic Experience* (1965); *She and Me: A New Statement of an Old Problem* (1974); and *The Mind of the Druid* (1989). Out of Howe's thirteen books, six can be considered as major works, in that they demonstrate the full range of Howe's psychological and

philosophical thought. Hence, what follows are brief synopses of those works which we most refer to frequently in the following chapters:

Motives and Mechanisms of the Mind (1931)

Motives and Mechanisms of the Mind collected Howe's early reflections on diverse subjects such as the role of the father and the role of the mother in our emotional development, fear, wish-fulfillment, and psychopathology. At the time *Motives and Mechanisms of the Mind* was published, Howe was working at the Tavistock Square Clinic. The papers were originally given as a series of post-graduate lectures in the autumn of 1930 (Howe, 1931, pg. vii). In *Motives and Mechanisms of the Mind*, Howe used case material based on his clinical work at the Tavistock Square Clinic and at St. Thomas's Hospital to ground many of his dynamically informed theoretical positions. And perhaps most importantly, he begins what will become a common practice in his subsequent works, which is to write "without immediate reference to any textbooks." While Howe acknowledged his "indebtedness to many writers," he avoided employing the typical academic practice of leaning on the reputation of other authors as a means to legitimize his own positions. Howe claimed that his expository style was original, although his ideas were not (1931, vii). At the time the lectures comprising *Motives and Mechanisms of the Mind* were composed, Freud, Adler, and Jung heavily informed Howe's ideas. Hence, it can be argued that Howe's style leaned toward existentialism and phenomenology, while the content of his ideas were still psychodynamic.

Motives and Mechanisms of the Mind is a foundational work. It shows Howe struggling to express the brilliance of psychoanalytic theory, while simultaneously developing insights that clear the ground for a more phenomenological, existential, and “metaphysical” approach to psychopathology and its treatment.

I and Me: A Study of the Self (1935)

I and Me is comprised of six lectures Howe delivered in 1934 for the Home and School Council of Great Britain, entitled The Selves, The Family, Society, Science, Medicine, and Religion. Howe’s understanding of the Self runs throughout all six of his lectures. Yet, to say that *I and Me* is *only* about the Self would be misleading. While still adhering closely to psychodynamic theory, Howe begins the process of dialoging with different philosophical traditions, both Eastern and Western. For instance, Howe made reference to St. Francis of Assisi, the creed of St. Athanasius, the Buddhist understanding of the “Middle Way,” jujitsu, and ceremonial magic. Moreover, and more importantly, Howe introduced a theme that will become integral to his subsequent works: the need for “metaphysics” to ground the practice of psychotherapy. Thus, *I and Me*, began Howe’s search for a metaphysical orientation to complement psychodynamic theory and practice. His reflections on spirituality, mysticism, science, and philosophy, for example, were not attempts to prove psychoanalysis “wrong,” but to articulate *relationships* between apparently divergent traditions. Howe’s understanding of “relationship” is not to be confused with synthesis.

Psychoanalysis and Buddhism, for instance, are not blended together or reduced to a shared “essence” to demonstrate a commonality or kinship. Instead, in *I and Me*, Howe introduced his understanding of “inevitable dualism,” whereby the different wisdom traditions, philosophies, and psychoanalysis are preserved as independent systems, whose differences are retained and brought into relationship. In his understanding of the Self, as being made up of at least two separate selves, which Howe labeled points A and B respectively, he demonstrated the dynamics of the points’ relationship and its implications for the practice of psychotherapy.

War Dance (1937)

During the early 1930’s, the stage for World War II was being set. In 1930, Great Britain, the United States, France, Japan, and Italy signed a naval disarmament treaty. In 1931, German industrialists financed the 800,000 strong Nazi party. In 1932, the Nazis led in German elections with 230 Reichstag seats. The United States protested Japanese aggression in Manchuria. In 1933, Adolph Hitler was appointed the German chancellor. He was subsequently given dictatorial powers. The Reichstag fire occurred in Berlin, which began the Nazi reign of terror. In 1934, the Nazis assassinated Chancellor Dollfuss of Austria. Hitler became fuhrer of Germany and the USSR was admitted to the League of Nations. In 1935, the Nazis repudiated the Versailles Treaty and introduced compulsory military service in Germany. Mussolini invaded Ethiopia and the League of Nations subsequently invoked sanctions. In 1936, the Nazis occupied the Rhineland, Italy annexed Ethiopia, and the Rome-Berlin axis was proclaimed.

(Japan eventually joined in 1940). The Spanish Civil War began, the war between China and Japan began, and Japan and Germany signed the Comintern pact (joined by Italy in 1937.) In 1937, Hitler repudiated the war guilt cause of the Versailles Treaty and continued to build German power. Italy withdrew from the League of Nations, the Japanese in the Yangtze River sank a United States gunboat, and Japan invaded China.

In the autumn of 1936, Howe was asked by the Home & School Council to give an introductory course of six lectures on Peace and War. (Howe repeated four of the six lectures at the Conway Hall, London, in February and March of 1937). In the Introduction to *War Dance*, Howe stated that he was “glad to do so because of the enforced clearing of my mind on the matter” (1971, pg. 17). Moreover, he asserted that he had “become increasingly aware of multiplied evidences of impending disaster” (1971, pg. 17). The aforementioned events, and Howe’s experience of World War I, formed the backdrop for his lectures, which were eventually reworked into a book in 1937 as *War Dance: A Study of the Psychology of War*.⁴

In *War Dance*, Howe stated that the problem of aggressiveness, of peace or war, is the problem of all time (1971, pg. 18). *War Dance* can be appreciated as a psychological, philosophical, and “metaphysical” meditation on aggressiveness. For Howe, war, like depression, anxiety, fear, etc., occurs when the “rhythm of

⁴ Howe served in India during World War I from 1914-1918. However, according to John Heaton, Howe did not see much, if any fighting, during that time (Heaton, Personal Correspondence, May 2003).

life” becomes unbalanced or is askew. Balance is restored, not by negating one side of a given polarity, but by creating a relationship between the opposing poles. Thus, Howe applied his understanding of “inevitable dualism” (first introduced in *I and Me*) to the psychology of war. Howe’s “inevitable dualism”, is a restatement of Hermes Trismegistus’ famous assertion, “That which is below is like that which is above, and that which is above is like that which is below.”⁵ Howe stated that this “mystic law” is the root of all analysis, and is “expressed in the diagram of relationship, one circle within another, for nucleus and protoplasm, self and circumstance, or nation and neighbors” (1971, pg. 19). While articulating what Howe believed to be the major factors that contribute to war, War Dance also proposed a unique solution based on his four-dimensional model of the cosmos, more on which below.

The Triumphant Spirit: A Study of Depression (1943)

Like *War Dance*, *The Triumphant Spirit* was written against the backdrop of war. As was previously indicated, the events that led up to World War II inspired Howe’s *War Dance* lectures. By contrast, *The Triumphant Spirit* has the distinction of being written during World War II. Howe wrote in his Preface to the *Triumphant Spirit* that war is a “very suitable setting for the study of depression⁶” (1943, pg. 5). Thus, the first two sections of the book, “The War as

⁵ Vedanta, many schools of Buddhism, Tantra, and Fractal Geometry/Chaos Theory make similar claims, albeit in the idioms of their respective approaches.

⁶ As a rule, incidents of depression and suicide drop during wartime. Howe’s comment is not meant to contradict this fact, but perhaps to complement it. Incidents of suicide and depression drop, not necessarily because a given individual is inherently less suicidal and/or depressed, but due to the possibility that self-

Healer” and “The War Within Ourselves,” deal with the subject of war. Howe stated that the first two sections were “introductory” in that they prepare the ground for the subsequent sections that address the psychology of depression more specifically. Nevertheless, they also have the power to stand on their own. In the first two sections, Howe used case histories to show how the war impacted his patients’ lives. In essence, he demonstrated how the “outward pains” and “penalties of war” exacerbated “mental disorder.”

In section four, entitled “Depression,” Howe made a statement that captures the essence of his project: “It is psychiatry with a difference, because the premises are different, but I hope it does not entirely depart either from orthodoxy or common sense” (1943, pg. 6). Howe’s “psychiatry with a difference” is both “metaphysical” and “imaginative.” Thus, Howe’s conclusions, which are based on his premises, are also “metaphysical” and “imaginative.” But, despite Howe’s “metaphysical” shift away from orthodoxy, he did not entirely depart from mainstream psychoanalytic interpretations of clinical phenomena. Rather, he attempted to create a somewhat sturdier bridge between his metaphysical approach and psychoanalysis than he did in his previous effort.

One of the hallmarks of Howe’s “metaphysical” and “imaginative” approach was that he did not feel the need to “prove” his positions via deductive reasoning:

destructive urges/impulses and intense feelings of anger and/or sadness are now projected onto an externalized other, i.e., the “enemy” within now becomes the “enemy” without.

“If the reader is fond of proof, and all that it implies of rigid argument, he will not like this book. I expect no quarter from reputed authorities, past orthodoxies, or people satisfied with fixed opinions, but I hope that artists of all kinds many feel more sympathy with my lack of ‘scientific’ proof. In fact, I do not want to prove anything other than that which is provided by our own experience” (Howe, 1943, pg. 6).

The aforementioned passage explains why Howe appealed more to artists, philosophers, and mystics than to the psychoanalysts and psychotherapists of his day. Evidently, Howe himself was partly responsible for alienating some of his contemporaries, as he disparaged the discursive argumentation that is remote from experience, but was prominent in academic and scholarly discourse. Hence, despite the fact that Howe attempted, not to “depart from orthodoxy,” he did so by his style of writing and through non-linear reasoning. In the *Triumphant Spirit*, we see a divided Howe, who addressed the psychoanalytic establishment of his day, while simultaneously breaking with the scholarly and linguistic conventions that defined them as a community.

The Triumphant Spirit was the first of a series of four books in which Howe explored how “mental disorder” is affected by “spiritual experience.” The other three titles were *Invisible Anatomy*, *Mysterious Marriage*, and the unfinished *Time, Dreams, and Imagination*. Howe placed the unfinished manuscript of *Times, Dreams, and Imagination*⁷ into a drawer and began working on *Mysterious Marriage*.

⁷ Howe never finished *Times, Dreams, and Imagination*.

Mysterious Marriage: A Study of the Morality of Personal Relationships & Individual Obsessions (1949)

As with *Time, Dreams, and Imagination*, Howe had difficulty completing *Mysterious Marriage*. In 1946, Howe felt “incompetent” to complete the “task he had undertaken.” Howe states: “...I was feeling restless and uncertain for various reasons: partly because I knew I should soon have to move my home, I knew not where. Again I found I could not go on. Angrily, I banged the manuscript into an empty drawer, and left it untouched and unseen for two whole years” (Howe, 1949, pg. 13). In May of 1948, Howe, who had since relocated, moved into his new “study-with-a-view” and finished *Mysterious Marriage*, which is a study of compulsion neurosis and the inferiority complex. During the two years that *Mysterious Marriage* was written, Howe also grew. In Howe’s words, “I knew that I was learning” (Howe, 1949, pg. 13). Using specifically Christian terminology, Howe stated that *Mysterious Marriage* had a second birth; it was “born again.” One cannot help but wonder whether Howe too underwent his own “death” and “resurrection” between 1946 and 1948.

In his Preface to *Mysterious Marriage*, Howe revealed a bit of his personal side, briefly outlining his struggles in completing the manuscript. This is significant because Howe rarely reflected on his own personal struggles in print. Yet, in his way of addressing his readers, Howe was more “personal” than his psychoanalytic contemporaries. Thus, it is no accident that while integrating psychoanalysis, Individual Psychology, Analytical Psychology, existentialism, and

spirituality in his analysis of compulsion neurosis and the inferiority complex, *Mysterious Marriage* is more about the meaning of relationship in its pathological and non-pathological aspects.

In *Mysterious Marriage*, Howe echoed Adler's contention that compulsion neurosis and the inferiority complex are *ways of living*, and not just psychodynamic diagnostic categories. Moreover, he contrasted the inferiority complex as a way of life, for example, with its "indefinable opposite," which Howe called the, "mysterious marriage."⁸ In *Mysterious Marriage*, more so than in *The Triumphant Spirit* and *Invisible Anatomy*, Howe showed that our way of life is based on our attitude toward 'spirit,' "as a valued reality in our experience." Moreover, Howe's idea that various psychopathologies, spirituality, and even psychotherapy are ways of living is central to *Mysterious Marriage*.

In Howe's words, *Mysterious Marriage* is a "tribute to the unknowable." Howe's understanding of "mysterious marriage" is based on the idea that each "person," rather than being an "individual," is both "unique" and "indefinable," that the "unknowable" is more important than the "known." For Howe, the difference between the words "person" and "individual" is significant. He wrote: "Persons have relationships, but individuals have obsessions, because relationships are free and fluid, whereas obsessions are binding and fixed" (Howe, 1949, pg. 15). This notion figures heavily into Howe's existential understanding of the difference

⁸ It can be argued that a person without an "inferiority complex" has a realistic self-image or an intact self-esteem. Howe would not necessarily disagree. He would simply add that an intact self-esteem is contingent upon acceptance of the unknown, which is ultimately "indefinable."

between psychopathology and authenticity. Furthermore, it is the foundation for his practice of psychotherapy. Howe's psychotherapy, based on his distinction between persons (relationships) and individuals (obsessions), is further articulated in *Cure or Heal?*, which is perhaps his best and most well-known work.

Cure or Heal?: A Study of Therapeutic Experience (1965)

Cure or Heal? shows Howe at the pinnacle of his development as a psychotherapist. Here, as in his other books, he dealt with a wide variety of subjects that reflected the protean nature of his thought. However, in contrast to *The Triumphant Spirit*, *Invisible Anatomy*, and *Mysterious Marriage*, which showed how "mental disorder" affected man's spiritual experience, *Cure or Heal?* pursues the thesis "that we cannot become truthfully related until we have first been properly divided" (Howe, 1965, pg. 20). Howe found support for his thesis in psychoanalysis, Jung's analytical psychology, Christian Mysticism, esoteric philosophy, Taoism, Vedanta, and Buddhism to name only a few influences. But unlike many more famous "synthesizers" of psychology and spirituality, Howe preferred to discover differences rather than conceal them.

Elaborating further in *Cure or Heal?*, Howe saw internal division as a necessary prelude to achieving wholeness, an idea introduced (in somewhat rudimentary form) in *I and Me* as "inevitable dualism." In *Cure or Heal?*, Howe refined his distinction between "persons" and "individuals", and refers to the individual as "egoic man" and to a person as "whole man." (I devote Chapter 8 to this important distinction). Egoic man lives in a condition of a-polarity. In

Howe's words, egoic man has "made himself sick by avoiding his dis-eases...he can hardly be expected to meet with much success in healing them by using his innumerable methods of *curing*-by-destroying them" (Howe, 1965, pg. 19).

Whole man, by contrast, lives by way of relationship, not only with other persons, but with the various contradictory and opposing aspects of his own psyche. Thus, just as he is able to accept the radically "other" in himself, he is equally able to accept his own self in others. In *Cure or Heal?*, Howe put forward the thesis that the rule for *healing* is, "Acceptance of the rejected other" (1965, pg. 57). As in *Mysterious Marriage* where Howe showed that compulsion neurosis and the inferiority complex are ways of life, in *Cure or Heal?* he demonstrated that "curing" and "healing" are different ways of living, and not simply different clinical or therapeutic techniques. Egoic man lives via his search for "cures", whereas whole man lives via healing, or acceptance. In order for healing to occur, from Howe's perspective, "our state of fix must go, to be replaced by movement in relationship, for more effective life" (Howe, 1965, pg. 60). And as Howe reiterated throughout his oeuvre, we must accept the unknowable "as well as the undesirable." The acceptance of both the unknowable and undesirable is a common theme that runs through the entirety of Howe's work. "It is the very essence of a therapeutic relationship" and a (psychotherapeutic) way of life predicated upon the art and science of unknowing.

Situating Howe

The object of this dissertation is to situate Howe in relation to the better-known psychodynamic theorists. Therefore, in Part II, there will be extensive discussions of Howe's views on depression, the inferiority complex, the psychology of love, and the psychology of the self. Following will be subsections that situate Howe in relation not only to Freud, but to Adler, Suttie, Jung, Winnicott, and Laing as well. These subsections will be sensitive to both content and history. Thus, for example, in Chapter 3, a comparison of Howe and Freud's views on depression serves as the foundation for his relationship to Freud and orthodox psychoanalysis. The subsections in chapters 4, 5, and 6 will be structured in a similar fashion.

In Part III, I will provide an extensive overview of what I believe to be the central themes of Howe's psychology. For the most part, this consists of an exposition of Howe's most important works: *Cure or Heal?* and *War Dance*. Part III will demonstrate Howe's remarkable ability to bring together Psychoanalysis, Jungian psychology, the Wisdom Traditions, Esoteric Philosophy, and Existential-Phenomenology to form a truly integrated view of man, as well as a form of psychotherapy that treats what Howe calls, "the whole man." In Part III, I deviate somewhat from the style adopted in Part II as I let Howe, for the most part, speak for himself. Part III is an attempt to write with Howe and not only about him. This work constitutes the first attempt to provide a comprehensive overview and critical appraisal of Howe's thought, an appraisal that is long overdue.

CHAPTER 3

Howe's Psychology of Depression

I believe that a person who is depressed has had some falseness in his attitude toward reality. Desire was too firmly fixed, too fully demanded, too impatiently attacked. It was as if we could not accept less than some perfection that we knew of and hoped for: we must have it all in its perfection, at once, now. This is unweaned desire, because it has not learnt its proper attitude toward reality. It cannot lose, surrender or let go the object which it loves. Instead, desire turns aside and invents in some way the full satisfaction that it demands. It feeds on fantasy, when fact is not so good. It builds in fantasy, and finds increasing satisfaction there. Desire loses contact with the real working world, preferring self-indulgence on the higher inward planes. It turns its back more and more upon reality, escaping into easier and less obstructive fields. Negative itself, depression is the outcome of a negative attitude toward life. It is the unwilling expression of unwillingness.

- E. Graham Howe in *The Triumphant Spirit* (1943)

Howe's Psychology of Depression

With the publication of *The Triumphant Spirit* (1943), Howe sought to articulate his psychology of depression. Depression is made of relatedness to the world. Moreover, the depressed person has a false attitude in his relation toward reality. In essence, his primary mode of encountering the world was through a kind of rigid defiance in the face of increasing self-imposed demands that ultimately directs the flow of desire in a unilateral fashion. Desire flows toward *the* object that must be had instantaneously, and often times, at all possible costs. From Howe's perspective, an impossible scenario is then created through the depressed person's false attitude toward reality, a scenario that cannot, in actuality, be lived.

Howe claimed that desire, in its “unweaned” mode of relatedness, ceases to surrender the longed for object in its “perfected” condition. Thus, as a means to retain the perfected object, unweaned desire “feeds on” fantasy in order to create the (imaginary) conditions whereby full satisfaction becomes possible. Ultimately, according to Howe, “desire loses contact with the real working world, preferring self-indulgence on the higher inward planes.” The connection between desire and the “real working world” is lost in favor of a psychological and emotional feast on the object as it exists in phantasy.⁹ And, as Howe alluded, the impetus for indulging on the “inward planes” is due, in large part, to the (real) obstacles that cast suspicion on the object’s “perfected” condition. Moreover, by “feeding on” fantasy the (real) obstacles that obstruct the instantaneous attainment of the object can be easily discarded in favor of, at times, (illusory) obstacles that can be waived with a psychological, emotional, and/or spiritual sleight of hand.

Howe’s central premise was that depression is the “outcome of a negative attitude toward life.” With this position, Howe deviated from the early 20th century orthodox psychoanalytic and object-relations interpretations of depression that emphasize orality, immaturity, or anxious/insecure attachment. Yet, he cryptically went on to assert that it is the “unwilling expression of unwillingness.” In *The Triumphant Spirit*, Howe began to play with paradox as a means to articulate psychological dynamics. While there were glimmers of paradox in

⁹ This flight into fantasy recalls Freud’s descriptions of imaginary wish fulfillment in *The Interpretation of Dreams* (1900) and *Two Principles of Mental Functioning* (1911).

Howe's early works, he begins the process of articulating its psychological significance in the early 1940's more clearly. For Howe, depression, as the "unwilling expression of unwillingness," occurs when suffering is resisted as opposed to embraced or willingly accepted:

Depression is the effect of a negative attitude toward a negative condition. It is the very opposite to willingness, where willingness is not a lovely dream, but a complete acceptance of every aspect of the experienced fact (Howe, 1943, pg. 179).

In Howe's view, depression first appears when there is disharmony or disequilibrium in a person's attitude toward that which is other. In Howe's (1943) words:

Such an unbalanced person does not have a proper attitude toward reality. He does not see it as it is, but as he wants it to be, and in imagination he tries to rule the world in such a way as to satisfy his wishes. This is Fantasy, the motive of which is the double one of escape from pain on the one hand, and the achieving of unreal pleasure on the other (pg. 175).

As a manifestation of an unbalanced relationship to reality, the depressed person is a ruler, a king, yet one who is psychologically and emotionally hedonistic and thus profoundly self-centered. While this may sound somewhat insensitive to the depressed person's psychic pain, for Howe self-centeredness underlies and *is* the depressed person's experience. Howe (1943) summarized the psychological causes of depression as "self-centered self-indulgent exclusiveness" (pg. 177).

Howe wrote that the depressed person's angle on life is essentially, 'What do I get out of it? How can I get more and pay less?' Moreover, the depressed person's attitude to life is one of grabbing pleasure and avoiding loss. Avoidance,

disinterest in, or withdrawal from the external world occurs when the depressed person finds himself surrounded by part-objects that whisper words of condemnation and/or defeat. The external world is treated as if it were a treasure to plunder or a plague to be avoided. When this occurs, according to Howe, the depressed person becomes hyper-dependent upon the very external world that poses the radical *either/or*. Consequently, external chaos prefigures his sense of self, and thus he is at its absolute mercy. Thus, said Howe, “When things go wrong and we lose the beloved, that is more than we can bear and so we become depressed. But depression too is one of the things we cannot bear, and so a vicious circle is set up as we become depressed at being depressed” (1943, pg. 177).

Depression, in large part, is a function of loss. The psychic pain occasioned by loss becomes intolerable, and the depressed person is propelled into a psychological and emotional abyss robs him of vitality. A perverse form of synchronicity then occurs, as the self interprets everything that happens, the rising and falling of each phenomenon, as affecting “me” on an intimate and personal (as opposed to transpersonal) level of awareness. Thus, the depressed person can be reasonably content as long as his encounters with the external world and its associated objects are conducive to his own personal happiness or well being.¹⁰

¹⁰ For Howe, the depressed person becomes solely identified with outward matters and external objects, that is children, job, country, nationality, etc.; therefore, via his identification, he labels himself either a “success” or a “failure.”

Throughout *The Triumphant Spirit: A Study of Depression*, Howe repeated the assertion that “depression cannot occur when there is a proper attitude to life.” Thus, if every experience is accepted, not from the standpoint of the self-indulgent, self-centered “me,” but from the perspective of a sense of self that is not overly identified with external objects (as determinants of self), then it is nearly impossible, according to Howe, for disappointment and unwillingness to manifest. Howe (1943) wrote:

When the emotional life has been aesthetically and athletically trained to be willing to surrender to experience, to be personally accurate, and to endure without any argument and without any limit, the spirit cannot simply experience depression (pg. 180).

The experience of depression is foreclosed through the act of surrender. Interestingly, Howe took a word that usually connotes loss and, paradoxically, uses it as a means to address the depressed person’s very experience of loss. Surrender can also be characterized by the act of submission, and in spiritual terms, submission to a transpersonal will that is much greater than the “me.” For Howe, surrender as a form of submission is a direct encounter with what he called *experience*, which involves being aware, and importantly, ultimately accepting all phenomena that pass through the spectrum of conscious awareness. Howe asserted what he believed to be the necessary outcome of a life that is predicated upon surrender: “The energy of life is then within, centralized, restrained, reserved – and ready for spontaneous release as required to meet all experience intelligently and willingly” (Howe, 1943, pg. 180). When the “energy of life” is centralized,

restrained, and reserved, desire is no longer in an unbridled condition. Thus, “perfected objects”, as fictitiously created by the imagination in response to a direct encounter with reality, find themselves in a precarious position, as it is impossible for them to secure a foothold in the psychic constitution of the emotional system. Howe’s emphasis on the athletic and aesthetic training of the emotional life suggests that through the practice of discipline a “proper attitude” in relation to existence can be cultivated. The metaphor of the athlete, who diligently practices a balanced approach to life, can also be found in the works of early Greek Orthodox mystics such as, John Cassian (*The Conferences*) and John Climacus (*The Ladder of Divine Ascent*). For Cassian (1997), we practice the spiritual life through discernment and for Climacus (1982), we climb the ladder of ascent through a series ascetic practices that are designed, to use Howe’s words, “to centralize the energy of life within.” For Howe, being psychologically and emotionally balanced, as garnered through a life of discipline, enables us to “face external factors” such as, fatigue, stress, family conflict, etc., “with a certainty of the least disturbance and the swiftest recovery of normality.”

According to Howe, not only is depression an expression of a negative attitude toward life, but it is also a sign of encouragement in that it signifies an attempt at a type of psychological reparation. It brings to awareness the tacit recognition that the flow of energy is unbalanced, askew, in a state of disequilibrium that throws perception and relatedness into an existential vacuum

whereby all phenomena that enter into the spectrum of consciousness are encountered as empty, lifeless, and meaningless. Howe (1943) wrote:

Depression is an attempt at cure, an attempt at self-cure; and it is a necessary phase in the patient's recovery. That is to say, it is not simply a bad thing. It is a real thing and has a real purpose. It is the expression of a real need. Negative as it may seem to be, the patient has not only been brought face to face with his own feelings, but pushed right under and overwhelmed by them. He is, as it were, swimming around in his own unconscious depths. He needs holding to it, keeping there; and that may prove difficult, because a negative attitude towards life finds itself intensified during depression into the will to suicide or ultimate escape from every unbearable problem (pg. 180).

Prior to the cessation of depressed feelings, the patient inevitably goes through a phase characterized by intense feelings that call attention to aspects of relatedness that have been neglected by the patient's own negative attitude. The patient finds himself swimming in waters that threaten to overwhelm him. While in this phase, Howe (1943) advocated that it is vitally important for the patient to be "protected from himself":

First and foremost the patient must be protected against himself and kept alive, because however low he feels himself to be, the hands of the clock will one day bring him up and round again. How long that time will be we cannot tell, but – and this is the second cause for encouragement – it is a characteristic of depression that it is a temporary phase followed in course of time by its conclusion. Depression, like any other disease, is like a clock. It may be fast or slow, but the hands are always moving (pgs. 180-181).

Depression and Time

If depression is "like a clock," as Howe indicated, then it has a cyclic quality. Depression has a *scopos* (goal) and a *telos* (end). Its *scopos* is to ultimately restore harmony/balance/equilibrium to the psyche while its *telos* is

self-termination. What happens, then, when psychiatrists, psychotherapists, psychologists, and counselors attempt to “cure” the patient of his depression? Are they not interrupting the natural course of depression’s cycle, and therefore, preventing it from moving toward its pre-destined end? Well-intentioned psychiatrists seek to “cure” the patient by prescribing Zoloft and other psychotropic medications. Some psychotherapists seek to alleviate their patient’s suffering through methods such as cognitive restructuring. But looking at depression from Howe’s perspective, it appears that psychotropic medication and/or methods such as cognitive restructuring may simply postpone or even annul its *telos*. How then does the treatment provider protect his patient, “keep him alive,” during the phase in which depression intensifies the patient’s negative attitude toward life? We might expect Howe to assert that if we simply let depression run its course without outside interference, it will end on its own. While that may be true, in some cases he did not assert that the psychotherapist should simply tell his patient something to the effect, “If you leave it alone it will go away.” Howe’s psychotherapeutic posture is active (and pro-active) rather than passive. According to Howe, cycles of depression can either be fast or slow, the psychotherapist cannot “leave the cure to the evolution of such natural cycles, as the patient may be thrown up in the course of time to where he was before, or even higher still” (Howe, 1943, pg. 181). The patient may find himself continually struggling to return the surface, to use Howe’s analogy, and eventually give up his will, his struggle, and allow himself to drown in the waters of his own unconscious.

When this does happen, the patient will look for a way to escape “from every unbearable problem” through identification with a false self, dissociation, or even suicide.

Psychotherapy and the Middle Way

Howe (1943) suggested that the Buddhist ‘Middle Way’ is a path toward a balanced way of life (pg. 181). While Freud and other orthodox psychoanalysts argued that Buddhism and other forms of spiritual practice negate life as a means to escape from its painful reality, Howe stated that they (Buddhists) “only wished to master the Law of the Wheel, so that they may not be bound in blindness to it” (Howe, 1943, pg. 181). So, did Howe simply tell his patients to become Buddhists so that they could find relief from their depressed feelings? Not at all. When Howe spoke of the Buddhist “Middle Way” in this context, he did so with the intent of comparing it with the doctor’s practice of effective psychotherapy. Thus, the “Middle Way” serves as a model for a harmonious, well-balanced life. He wrote: “Like the doctor with the depressed patient, the aim of our philosophy and ‘cure’ must be not only to escape from illness, but also to achieve the middle balanced way of health, that will avoid recurrence of disaster” (Howe, 1943, pg. 181). For Howe, the goal of psychotherapy is more than just helping the patient to be, in Freud’s terms, “functionally neurotic.” Moreover, in his psychology, the patient is capable of much more than adapting to his own incurable malaise. The depressed patient is capable of achieving something positive, namely, a balanced

way of life that enables him to actually observe the ebb and flow of his own psychological cycles.

Howe's Understanding of "Consciousness"

Howe used the term "consciousness" to refer to the manner in which the patient brings attention to his depressed feelings. Consciousness, according to Howe, is the "willingness to look and see; no more, no less" (Howe, 1943, pg. 181). Consciousness is not only a state of awareness, but is also a method that Howe used when he practiced psychotherapy with depressed patients. The patient is invited to bring conscious attention to whatever arises in his experience. For example, when depressed feelings arise the patient is asked to look at them without any desire to change them, restructure them, or do anything to them. As Howe (1943) wrote: "Consciousness, in the sense in which I am using it as a healer, is not in itself an effort to change anything or to escape from it" (pg. 181). This may prove to be most challenging for the patient, as his first impulse runs counter to what Howe advocated. The patient, through years of conditioning and habit, has learned to recoil from or resist any feeling that may seem aversive. Thus, he has created his own private war between feelings that he believes to be aversive and his ego. He experiences himself as being constantly under siege, locked in battle with psychological forces that attack from all directions. Howe's invitation to his patient to "look and see" is simultaneously an invitation to give up the battle, and an invitation to risk losing something illusory for the sake of gaining something substantial. Jesus asserted that the "Kingdom of God" lies

within us, just waiting to be found. However, very few bother to direct their attention inward out of fear of they may find. Instead, they prefer to cling to self-constructed illusions that serve to protect the ego from reality. As a result, the ego ultimately becomes a false self, as it identifies more and more with its illusions.

For Howe, consciousness is meditation/contemplation, not in the religious sense, but in the loosely spiritual sense, is a kind of interior perception that casts light on the waters of the unconscious. Howe (1943) asserted: “It is an act of vision or ‘contemplation’; it combines a gesture of surrender with accurate and objective observation” (pg. 181). Consciousness, or the act of contemplation, is similar to Freud’s “evenly hovering attention” in that the psychotherapist attends to phenomena as they arise in the therapeutic relationship, without imposing any judgment on what is encountered. It is similar to contemplative or centering prayer, as discussed by Father Thomas Keating in *Foundations for Centering Prayer and the Christian Contemplative Life* (2002) and Basil Pennington in *Centering Prayer* (1982), in which the ego is silent in the face of a power that is beyond its ability to either control or comprehend. We surrender to this power with absolute trust that we are in hands much greater than our own, hands that will provide care for our souls. While this language may sound religious and/or spiritual, the sense is profoundly psychological. In Howe’s psychology, consciousness as a psychotherapeutic technique differs from consciousness as a spiritual practice in that it requires the presence of another; it is not a solitary practice as is the case with meditation and contemplative prayer. Howe (1943)

stated: “The process probably needs the help of some person other than the patient with whom it can be shared, so that together they can study the phenomena as they appear” (pg. 181). It is important to note that Howe’s subject, as in *The Triumphant Spirit*, was never the spiritual aspirant but always the depressed patient. If it were the aspirant, the practice of consciousness could be done alone, as spiritual growth does not necessarily require the presence of another. For Howe, the experience of depression, as encountered through conscious awareness, must be shared in order for balance to be restored. Not only the experience of depression, but also every detail of psychic life must be shared and subsequently explored for possible significance. Howe (1943) wrote:

Such details include everyday conduct and dreams, past and present experience, hopes and fears and all imagination. The point is that they must be examined in detail, for depression is an undifferentiated continuum that must be sorted out, and each part related in its proper place to the other parts and to the whole (pg. 181).

With the depressed person, every experience, feeling, emotion, thought, etc. runs together. The boundaries that separate one experience from another, for example, are not clearly distinct. Furthermore, that is why in severe depression the ego interprets every event as signifying its own hopelessness. The ego boundaries between self and other are not broken, as in the case of psychoses, or tenuous, as in the case of borderline conditions, but indistinct.

Howe’s Relationship to Sigmund Freud and Orthodox Psychoanalysis

Now that Howe’s psychology of depression has been explicated, I will examine his relationship to Freud, in terms of their respective understandings of

depression, and of Howe's general orientation toward orthodox Freudian thought. Rather than use the term "depression" to refer to the depressed patient's experience, Freud preferred the term "melancholia." Melancholia is to be distinguished from periodic depression. Freud (1995) wrote:

I must look upon *periodic depression*, an attack of anxiety lasting for weeks or months, as a third form of anxiety neurosis. This, in contrast to melancholia proper, almost always has an apparently rational connection with a psychical trauma. The latter is, however, only the provoking cause. Moreover, this periodic depression is without psychical [sexual] anaesthesia, which is characteristic of melancholia (pg. 58).

The aforementioned quote, from a letter to Wilhelm Fliess dated February 8, 1893 represents one of Freud's early reflections on the distinction between periodic depression and melancholia. Freud's famous paper *Mourning and Melancholia* was written in 1917, 24 years after his letter to Fliess and 26 years before Howe's *The Triumphant Spirit: A Study of Depression*. *Mourning & Melancholia* (1917) was written toward the end of WWI, when psychoanalysis was winning adherents from all over Europe. Physicians from Germany, Switzerland, Austria, Hungary, and England were practicing orthodox psychoanalysis, and regarded Freud a kind of spiritual father who revolutionized our understanding of human behavior. Howe wrote *The Triumphant Spirit*, two years before the end of World War II. Both Howe and Freud wrote their principal reflections on depression during times of global conflict.

By 1943, Howe had already written the majority of his principal works. *The Triumphant Spirit*, however, denoted his mature views on the psychology of

depression. While Howe alluded to the experience and treatment of depression in *Motives and Mechanisms of the Mind*, he treated the subject with greater attention in his later work. Nowhere in any of his writings, will you find Howe making pejorative statements. Unlike many psychologists, psychiatrists, and psychotherapists who create a straw man out of Freud in order to mount hostile attacks on his ideas or his character, Howe was sympathetic toward Freud. Yet, we must not confuse sympathy for orthodoxy. While Howe discussed and made use of notions such as the Oedipus Complex, projection, identification, and object relations, he also allowed himself the freedom to deviate from orthodox interpretations when his own experience, or the experience of his patients, called for what he believed to be a more “objective” understanding. Thus, fidelity to (shared) experience guided Howe’s interpretations, and not some theoretical ideal of fidelity to Freud. When Howe felt that orthodox Freudian theory could not explain what was being experienced or expressed by the patient, he sought other models of the mind, delving into Buddhism, Mysticism, Occultism, Taoism, and Existential Philosophy to illuminate the psychotherapeutic process. He moved back and forth between the wisdom traditions, philosophy, and psychoanalysis to describe clinical facts. Needless to say, Freud would have deplored Howe’s uninhibited eclecticism. Freud hoped that psychoanalysis would function as a grand metatheory that would scientifically explain everything from culture, religion, literature, and art to psychopathology. From an orthodox Freudian

perspective, Buddhism, Taoism, and the other wisdom traditions represented “wish fulfillments” or “illusions.”

Howe rejected this pejorative assessment of the wisdom traditions. Throughout his life, Howe was in continual dialog with meditation, Jungian psychology, and other diverse subjects. He approached them with reverence and humility, looking to learn from them as a disciple, rather than critique them from the superior standpoint of a so-called “expert”. Howe never lost sight of the fact that he was a doctor/healer; he never forgot that it was his patients he was serving by exploring subjects deemed taboo by orthodox psychoanalysis. His patients came first and the varied theories that explained his patients’ experience came second. Howe’s psychology was built upon his patients’ experiences; thus, he could not dishonor them by putting them through the psychoanalytic filter when it was not warranted.

I will now direct my attention to Howe’s psychology of depression and Freud’s concept of melancholia. They converge on some points, but diverge in many as well. Howe and Freud agreed about the ego’s identification in depression. Freud (1995) wrote in *Mourning and Melancholia* that the ego identifies with the lost object (pg. 586). The experience of the melancholic is one of loss, which results in mourning. Moreover, object-loss gets converted into ego-loss; hence, it is not only the lost object that is mourned, but also the ego (as a result of its identification with the object). So, melancholia has a powerful narcissistic element. This supports Howe’s contention that depression is self-centered. Yet, it

differs in that Freud (1995) saw melancholia as a kind of “impoverishment of ego-libido” (pg. 589) whereas Howe saw depression as ego inflation. In Howe’s psychology, the depressed ego is inflated because it interprets everything that happens as pointing toward ‘me.’ Freud viewed melancholia as an impoverishment of ego-libido because of the depressed patient’s report that he feels worthless, morally despicable, and fundamentally empty. The difference is simply one of emphasis rather than content. Howe emphasized the relationship between the external world and the ego. In Howe’s psychology, objects in the external world reflect the depressed patient’s ego. Thus, he does not encounter “reality” without seeing himself in it. The depressed patient is, ironically, “full of himself”. The narrowing of attentional focus results in a subjective world where his ego becomes bigger and bigger and the world becomes smaller and smaller, less and less. And, his response to this world is to be depressed. Both Howe and Freud viewed depression/melancholia as a preoccupation with loss and self-centeredness/narcissism, but Howe deepened his exploration, by not only seeing the pathological aspects of depression, but by appreciating its healing aspects as well.

Concluding Remarks

Not only did Howe see the healing aspects of depression, and hence, go beyond Freud’s mechanistic and pathological interpretation of melancholia, but also saw depression as cyclic and importantly as a manifestation of a *negative* attitude toward life. Fundamentally, depression is an expression of a skewed

relationship with life and with others. To restore this relationship, according to Howe, we have to risk breaking down for the sake of being rebuilt; we have to risk dying for the sake of being reborn. If depression arises, we must simply watch it, or said more accurately, watch it simply without judgment and with the willingness to surrender if needed. In Howe's words:

We must be broken down, experiencing a needed suffering as our lumps are dissolved and our stuff prepared and our instruments made good. Sometimes we must fall, lose, die willingly and be dissolved, to be born again (1943, pg. 196).

CHAPTER 4

Howe on the Inferiority Complex

An inferiority complex is an unconscious defense mechanism, the purpose of which is to promote such activity as will protect the subject (whether organ, individual or group) from a condition or feeling of intolerable inferiority (inadequacy or insecurity), by the immediate assumption of a relative (compensatory) condition or feeling of superiority (1949, pg. 168).

- E. Graham Howe in *Mysterious Marriage*

Howe's Psychology of the Inferiority Complex

The focus of this section is Howe's understanding of the inferiority complex, and his book *Mysterious Marriage: A Study of the Morality of Personal Relationships and Individual Obsessions*, (1949).¹¹ Howe first discussed inferiority feelings in *Motives and Mechanisms of the Mind* but it was *Mysterious Marriage*, that he developed his understanding of the inferiority complex. As in *The Triumphant Spirit*, *Mysterious Marriage* continued Howe's discussion on how "mental disorder" affects "spiritual experience" (Howe, 1949, pg. 13). Before he addressed the inferiority complex, Howe warned about "the danger of labels." He (1949) wrote:

As soon as any significant idea has passed into the common currency of words, it is in danger of losing its meaning. It is in danger of being flattened, as it were, into a lesser dimension. It is as if, when 'the word is made flesh', it loses something of the intangible, as it gains something of the tangible (pg. 163).

¹¹ The inferiority complex was first talked about by Freud and popularized by Alfred Adler. Howe's relationship to Adler will be discussed shortly.

Howe alluded to the Gospel of St. John 1:14 when he talked about the “word made flesh.” The “word” here is referred to in the Greek as “logos.” This was the very “word” that, “in the beginning was with God.” From the perspective of Christian theology, the “word made flesh” was Jesus (Greek) or Yeshua (Aramaic). Was this a form of “blasphemy” on Howe’s part? After all, is it not as a result of the “word made flesh” that all believing Christians are saved? Moreover, is not the incarnation of the logos one of the basic catechisms (instructions) of the Catholic Church?

Arguably, Howe’s idea that ideas lose something intangible when they become tangible is Gnostic in derivation. In Gnostic thought, Yahweh committed a grievous error when he decided to “trap spirit in the form of matter.”¹² Yet, how does the divine logos go from word to label? How is the “significant idea” in danger of losing its meaning? When the idea goes from word to label it becomes, according to Howe, “familiar” as a result of repeated use:

As our familiarity with its constant use calls out less and less of that critical response, which is only given to strangers, the word comes to mean less and less, as it is used more and more. It is taken for granted, because we assume we know all about it (Howe, 1949, pg. 163).

When the word becomes a label it promotes reification, and the smug assurance that those who use them really know what they are talking about. For example, the word “God” has lost most of its “mystical” sense, not only among many Jews, Christians, and Muslims, but with unbelievers as well. “God” has become a label

¹² In the case of Gnostic Christians, the belief is that the divine logos, in his opposition to Yahweh, became incarnate in the form of Jesus to free man from matter.

that many people take for granted. Believers may argue, “The Torah tells me how God created the earth,” “The Bible is God’s Word,” and “Muhammad is the last of the prophets.” The unbeliever may argue, “God cannot exist because the earth could not have been created in six days.” Both the believer and atheist subscribe to the view that the nature of “G-d” can be fully known. The premise of labeling is that the word really represents the phenomenon it is supposed to refer to, which is not always the case.

When Howe talked about labels being dangerous, he did so with the understanding that labels promote superficial thinking. So, for example, words like the “Oedipus Complex,” “Id,” “Ego,” “Superego,” etc. originally functioned to promote insight and inquiry. However, as they became embedded in psychiatric and psychoanalytic discourse, they tended to lose their significance. Instead of saying something meaningful about patients’ experience, they became articles of faith that were deemed true *apriori* and increasingly disconnected from their patients’ psychological lives. Nowadays, the same can be said about the way in which many clinicians appropriate the DSM. Labels such as ADHD, bipolar disorder, and major depressive disorder are often used to describe patients as walking embodiments of a psychiatric classification system, rather than function as windows to a more in-depth understanding of the patient’s unique psychopathology. Howe wanted to recapture the freshness and inquisitive character of psychoanalysis by returning meaning to words that had lost much of their significance through indiscriminate use. By reconnecting words to

experience, Howe hoped to revive and revise ideas that had been fossilized by what can be called the canonization of Freud and his doctrine.

Howe was not only unhappy with the indiscriminate way in which professionals used psychological jargon. He was also wary of the way in which clinical terms had infiltrated the mass media. In reference to the word “inferiority complex,” Howe (1949) wrote:

The ‘word’ in this case is an unhappy choice, being a fragment of psychological jargon that has penetrated through the pages of journalism into common use, where it has become flattened *out until everyone thinks they know all about it*. The label for our study is an ‘inferiority complex,’ for which, I am afraid, there is no equivalent in either basic or biblical English (pg. 165) (emphasis added).

To mitigate the pervasive trivialization of mental health discourse, Howe often turned to philosophy and spirituality to illustrate the deeper significance of psychological concepts rather than to make psychotherapy a philosophical or spiritual discipline. While Howe admitted that words like “inferiority complex” are unpleasant, he insisted that we “make the best of them,” “infusing them with such light of meaning as we can” (Howe, 1949, pg. 165).

According to Howe, an inferiority complex is not simply defined by *feeling* inferior. There are times when we can lack self-confidence, but do not have an inferiority complex. Lacking self-confidence is a feeling that is tolerable. What differentiates lack of confidence from an inferiority complex is the intensity of the feeling. Once a lack of confidence becomes intolerable (on an unconscious level), a protective mechanism functions to reverse it:

The inferiority complex's essence is in the fact that the feeling of insecurity is experienced as intolerable, so that an unconscious protective reaction of immediate avoidance is brought into operation, the purpose of which is to reverse the position to one of superiority (Howe, 1949, pg. 169).

It is not as if the person *consciously* decides to change the way he feels. He does not say to himself, "I feel inferior, so I will tell myself that I am superior so as to feel better." Nevertheless, it is instructive to note that many psychotherapists tell their patients to identify "negative patterns of feeling," and then convert them into positive affirmations. While these affirmations may help patients "feel better," they do not address the unconscious complex that often lies underneath. The ego, which is partly conscious, becomes identified with the defense, which is really a kind of "reaction formation."

Howe considered an inferiority complex, as defined by neurotic overcompensation, to be "instinctive" (Howe, 1949, pg. 169). According to Howe man has many instincts, some of which are adapted to reality and kept, others which are not useful and should be outgrown and discarded. This corresponded to Freud's idea that man is primarily instinctive and that many of his instincts are adaptive or can be appropriately sublimated, but that others guide man toward self-destruction. Moreover, our defenses are many times expressions of contradictory attitudes, as is the case with the fundamentalist preacher who crusades against pornography only to be attracted to sexually explicit material. For Howe, rather than avoid the underlying complex we must ultimately encounter it:

It is no use nowadays running away from danger. To use our heads will serve us better, whether the danger be in the form of a charging omnibus, a financial disaster, a falling bomb, a domestic quarrel, a threat of war, or any other mortal peril whatsoever (Howe, 1949, pg. 169).

It is not, for example, that the patient stays in the path of an incoming bus. Rather, the patient must encounter and ultimately confront the bus by first acknowledging its existence and then step out of its way. For Howe, being blind to the destructive unconscious forces that often motivate behavior is like closing one's eyes with the hope that the bus will either magically disappear or turn away at the last moment. It now begs the question: if the patient is to "outgrow" the instinct of self-defense how does he come to know it if it is fundamentally unconscious? (We return to this question presently).

Staying with Howe's understanding of the inferiority complex as an instinct, he stated that the (defensive) remedy against the intense feeling of inferiority is to "promote activity":

The instinctive remedy is always toward action, either evasive or aggressive, and either within the self or in the outer world. The cry is not so much in question form, 'What can be done?' as rather, 'Something should and must be done immediately!' (Howe, 1949, pg. 170).

The activity can be psychological and/or physical. In either case, the *scopos* is to evade the intense feeling of inferiority. By not remaining psychologically and/or physically "still," the patient deludes himself into feeling that the complex does not have a foothold on him. This activity creates enough psychological space for the conversion of the instinct to take place. (The intense feeling of inferiority can then manifest as its opposite – superiority). For Howe, the "racing mind," as

found in states of anxiety and worry, is one of the most common forms of instinctive defense, and it is not recommended as a practical means to the solution of any problem (Howe, 1949, pg. 170). Thus, Howe did not advocate any form of psychotherapeutic “treatment” that merely “busies the mind” because it ultimately functions to reinforce or strengthen the defense.

The goal of neurotic overcompensation is to produce a conscious sense of relative superiority. For Howe, the goal was relative to the condition that initially spawned the feeling of inferiority (Howe, 1949, pg. 173). Yet, according to Howe, the patient becomes a tyrant who seeks to conquer, not only the initial condition that spawned inferiority feelings, but also each and every experience that might elicit it. Therefore, he must be “on top” in all situations. He does not treat persons respectfully, but as entities or obstacles that must bend to his will. If conquered, they attest to his status as a “superior man.” His “love” relationships are not marked by love because the other does not actually exist for him. In sexual activity, her affective “response” to his “love” lets him know that he is a good lover. He could not care less for how his partner truly feels as long as he “gets off,” and importantly, “gets her off.” His sexual activity always has a narcissistic, masturbatory element. He enjoys himself as imagined in and over the other. In conversation, he is in a continual debate, whether explicit or implicit. The patient’s goal is to outsmart his nemesis so as to prove his superior intelligence. And importantly, for Howe, the “victory,” whether in sexual activity, conversation, work, and/or any form of “play” (the patient does not truly know how to play

because having fun is almost impossible) must be “total, final, absolute” (Howe, 1949, pg. 173).

The patient creates for himself an impossible demand, a demand that is difficult to meet. He sets the bar for himself so high that he sets himself up for failure. Not only does he set the bar high for himself but for others as well. Thus, they are always in the position of being inferior to his superior position. (Yet, in actuality, he feels inferior to them). Just as he cannot meet his own demands they cannot meet his demands for him. He exists in a world whereby he is profoundly alone, separated from himself and from others. Because his demands are so high, and his ransom must be paid immediately, he creates “much anxiety, fear of failure and further insecurity, which sets up an endless spiral of further unconscious over-compensatory defense mechanisms, in a perpetually increasing vicious circle of anxiety and escape” (Howe, 1949, pg. 173).

What are the causes of an inferiority complex according to Howe? In his words:

The inferiority complex is derived from a state of extreme and unbalanced contrast, the better aspect of which makes the worse intolerable by comparison. The defense mechanism is then set up unconsciously to make the worse state immediately as good or better than the other (Howe, 1949, pg. 175).

Again, as he did in his study of depression, Howe alluded to the importance of balance. When there is an imbalance there is disharmony. Psychic equilibrium is offset when the patient identifies with the feeling of superiority that ultimately functions to repress the underlying feeling of inferiority. Thus, the defense

mechanism creates an opposition, an opposition that creates an internal war between psychic reality (the intense feeling of inferiority) and the conscious attitude (the overt expression of superiority). Yet, no matter how superior the patient feels consciously he is always haunted with a sense of inferiority. He evades it only in his imagination by “convincing” others, and most importantly himself, that he is “superior.”

Throughout Howe’s life, he was always searching for new terms and expressions to describe psychological realities. He felt that much of the terminology that was used by psychoanalysts and psychiatrists had become stale, failing to capture the reality of the multifold expressions of the psyche. Thus, he turned to words such as “sin”, “contemplation,” “meditation,” and “prayer” to bring life to a psyche that had been reified by the canonical use of psychological jargon. In his own words:

I believe that we should discover that much of our so-called human ‘sin’ is, in fact, actually a state of illness on the medical or psychological level, where an unconscious defense process of a morbid kind has been mechanically activated by a state of intolerable anxiety (Howe, 1949, pg. 176).

Howe’s ideas on the inferiority complex had social-psycho-logical as well as clinical applications. When Howe was writing *Mysterious Marriage*, during the mid-to late 1940s, World War II was coming to an end. He had witnessed the horrors of war, and as did many other European psychoanalysts and philosophers during that period, was exploring how such violence could be possible. Howe did

not simply point to Hitler, Mussolini, or Hirohito as “causes” for the war, but saw the “disease” that lay within humankind as a whole:

I believe that mankind in general is sick with this as yet unrecognized disease, for which we have no other name at present than the inferiority complex. I believe that most of our troubles in the world today, which are accumulating to the danger point of ultimate disaster, are due to this disease, and not to ill will or evil intent. And I believe that it is this unconsciously protective thrust of the inferiority complex, working to set us off our true balance at every level, in every time and place, which is the main root and cause of our human distress...It is quite certain that the deep-seated disease of the inferiority complex will never respond successfully to moral blame or to the untimely surgery of war. That is its symptom and its cause. It can never be its cure (Howe, 1949, pg. 176).

If war is not the answer, then what is Howe’s recommended method of treatment?

What would psychotherapy of an inferiority complex entail?

Howe stated that there are two guiding principles in the prevention of inferiority complex: 1) acceptance and 2) nourishment (Howe, 1949, pg. 200). We when accept the other, we listen to the other. The kind of listening that Howe advocated was not a superficial form that was characterized by simple gestures that feign true communication. Rather, when listening we are attentive to the other as he is, without bias, without prejudice, and without judgment. No demands are created for the other to meet. We meet the other as he is and we present ourselves as we are. If feelings do arise in the midst of our relationships with others, whether the feeling be one of love, respect, admiration, or even hate, Howe suggested that we become aware, or conscious, of how these feelings exert an influence on the relationship, and subsequently, work to change its dynamics. This is akin to Husserl’s (1999) *epoché* and Nyanamonika Thera’s (1973)

mindfulness meditation, which invites us to first, be aware of the contents of consciousness, and then second, to bracket any content that is likely to bias our perception of a given phenomenon so that the phenomenon can be encountered as it is. When Howe wrote of nourishment, it was as a complement to acceptance. Nourishment is the “flow of interest, attention, and affection that goes over to the other” (Howe, 1949, pg. 201). The interest, attention, and affection that Howe discussed was not motivated by self-interest but out of a desire to give of oneself, in the fullest way possible, to the other. How do we know if the other is being nourished? According to Howe, we know the quality of nourishment by its results. For example, if our flow of affection is not self-centered the other will feel psychologically and emotionally fulfilled. If unconsciously our motive is based on personal interest or the desire to “gain” something from the other, he will often feel as if he has been robbed, as if something had been taken from him. In essence, we nourish the other with our flow of affection, attention, and interest by the motivation to give to the other. When we enter an interpersonal exchange, we do not ask ourselves, “What can I get from this person?” but “What can I give?”¹³ Thus, Howe’s approach to prevention was predicated upon an attitude of servanthood.

But, when prevention is not an option, when an inferiority complex is already pervasive, what is the best approach? Howe began by reflecting upon the

¹³ We can imagine a child, equipped with Howe’s tools of acceptance and nourishment, sitting on the lap of Santa Claus and presenting him with a Christmas list of things he is going to do for others or gifts that he plans on getting for his loved ones and close friends.

futile methods of self-treatment that were being practiced in mid-twentieth century America. He wrote:

The commonly advocated way of cure for an inferiority complex is as negative and futile as the disease itself. It is particularly popular in America, where hope still thrives undismayed along with every kind of religious cult that offers the Promised Land now. 'There is no problem and there is no pain. Only believe and you shall receive. Knock and enter. All is yours' (Howe, 1949, pg. 202).

Throughout much of the 1940's, various religious cults made their way from India to Europe and the United States. A substantial number of Americans had grown weary or skeptical of mainstream Judeo-Christian denominations, and sought solace in the mystical religions of Asia. While Howe was certainly sympathetic to Buddhism, Taoism, and Hinduism, he felt that the religious cults that found their way to the United States promised a kind of instantaneous enlightenment that only fed on the fantasy of superiority. Many Americans, because of their inferiority complexes, misappropriated the Hindu teaching of "Thou Art That," the teaching that pointed to our fundamental identity with the divine. Moreover, many misinterpreted, with at times psychologically disastrous results, the Buddhist doctrine of No-mind, No-self. Many of the gurus who came to America were Hindu teachers; most of them were well intentioned. However, because of their relative unfamiliarity with the inferiority complex, they erroneously assumed that their disciples could readily understand and apply what they were being taught. Instead, rather than attaining true enlightenment or awakening, many of the disciples developed what Howe called "compensatory phantasies of

omnipotence,” which repeated that “gramophone record of refusal to be what and where we are, according to the usual rules of the inferiority complex” (Howe, 1949, pg. 202).

Howe refused this false sense of omnipotent optimism. Instead, he advocated for a more pessimistic, more honest self-appraisal much in the same vein as Dostoevsky’s main character in *Notes from Underground*: “I am weak and sick, confused, muddle-headed, and wrong-willed. I have done wrong and caused great trouble. I cannot save myself and yet I am confronted by the urgent threat of everpressing disaster” (Howe, 1949, pg. 203). No matter how difficult it is to stay with the painful experience of being honest in one’s self-appraisal, for Howe it is absolutely necessary as it marks the first phase of the curative process. He summed up this process of staying with the experience as *detachment* (acceptance).

Detachment and acceptance were synonymous for Howe. We can only accept the experience by detaching from it. Along with *detachment*, we must also have *patience* and *courage*. We must give up the desire for quick fixes that only temporarily remedy the problem only to find later on that not only does the problem still exist, but has been worsened by our attempts to apply a hasty “cure.” According to Howe, having patience requires the willingness to suffer. The suffering about which Howe wrote did not have a masochistic element, as there is certainly no delight in accepting one’s pain. And, as it is frightening to stay with the pain, and to not take flight into fantasy, Howe advocated that we have to have *courage*. The second phase requires that we venture a *personal interpretation*,

what it all means now, in the light of past experience and future purpose (Howe, 1949, pg. 203). Our personal interpretation leads to understanding, an understanding that places pain within a historical context. By so doing, the pain is given significance; therefore, it becomes an opportunity for further growth rather than a harbinger of disaster. The next phase is *what you can do about it*; but, as Howe stated, “that needs a pause for further consideration before you make your plunge” (Howe, 1949, pg. 203). For Howe, we enter a period of intense reflection before deciding to *do* anything. Paradoxically, if after the period of reflection, we still feel in control of the situation, master of our destiny, assured of a successful outcome, and that victory is a foregone conclusion, then the inferiority complex is still holding fast.

To be in control and to be able to manifest one’s own destiny are marks of a “successful” person in western culture. In the 21st century United States, Donald Trump, Bill Gates, and Steve Forbes, serve as models for what we aspire to become. Having great wealth is synonymous with having great power and having greater power is synonymous with being “masters of their destinies.” Yet, this attempt at “mastery” comes at a great price. It further strengthens the inferiority complex and distances the person from the path toward healing. According to Howe, it is through openness to the unknowable, and giving up the desire for control that liberation comes:

It is *not* true: you do *not* know; you are *not* in control: you can *not* be sure. There is an uncertain factor in life and persons, which is not present in the world of things which you can control. It is this mysterious factor which I

have called the ‘C’ factor, which is in the quality of the relationship itself (Howe, 1949, pgs. 203-204).

In the mystical theologies of Pseudo-Dionysius, Meister Eckhart, and the unknown author of the *Cloud of Unknowing*, the divine is ultimately unknown. You cannot say what the divine is; you can only say what it is not. There is an equivalent teaching in Advaita Vedanta, “Not this, Not that.” Howe was familiar with both schools of thought. Yet, to say that Howe merely applied these teachings to the healing of the inferiority complex would be inaccurate. He extended these concepts with his assertion that the ‘C’ factor happens in relationship. It is the “between” in any relationship, whereby the flow of attention is both freely given and freely received. Howe stated that it marks a “new dimension of experience” that leads to the “reversal of values” (Howe, 1949, pg. 204). The false sense of superiority is finally relinquished, and the person is brought face to face with the feelings of inferiority that were previously evaded. To quote Howe, the “highest becomes the lowest and the lowest highest: and in which the highest is discovered in the lowest and the lowest in the highest” (Howe, 1949, pg. 204). The separation between high and low is no longer distinct. Thus, it becomes impossible for the inferiority complex to hold sway because there is no superiority (high) to be had at the expense of the other’s inferiority (low). Superiority is discovered in inferiority and inferiority is discovered in superiority. Initially, the dissolution of the inferiority complex ushers in a period of demoralization that precedes a new moralization as our “attitude toward life” that goes through a period of radical

adjustment (Howe, 1949, pg. 204). For Howe, healing was not only psychological but ethical and moral as well.

Howe's Relationship to Alfred Adler

There are many similarities and differences between Howe and Adler. Adler has been called “the father of the inferiority complex.” Yet, Adler himself was the first to say that he should not have been credited with this title. Adler first used the term, “inferiority complex” in 1926, while lecturing in the United States (Adler, 1964, pg. 256). Adler argued that Freud was the true “father” of the inferiority complex and that he perhaps merely popularized the idea first throughout the United States and later throughout Europe in the 1930's. Howe owes Adler a debt of gratitude for his understanding of the inferiority complex, but he did not simply reiterate Adler's insights. No doubt, when Howe wrote *Mysterious Marriage* in the 1940's he was well acquainted with Adler's “Individual Psychology.” Howe agreed with Adler's assertion that “it is not the sense of inferiority which matters but the degree and character of it” (Adler, 1964, pg. 257). Howe himself stated that the pathogenic properties of inferiority feelings in the fact that the feeling is intolerable. Adler argued that the inferiority complex is more than just a complex, but can be likened to a disease. Indeed, he sought to eliminate the word “complex,” not only because of its Freudian derivation, but because he felt that it did not accurately describe the phenomenon. Howe also likened the inferiority complex to a disease, but decided to retain the word, “complex.”

Adler's decision to jettison the word complex may have had more to do with his relationship with Freud than it did with the accuracy of the phrase itself. Adler's bitter break with Freud left him with a profound distaste for everything Freudian. Thus, he attempted to create a system of psychology (Individual Psychology) that overturned many of Freud's central premises. Hence, as with Jung's psychology, Adler's psychology can be viewed as a psychology of opposition, as it was based on his opposition to Freud the man. Moreover, and from a Jungian perspective, Adler's psychology may be more or less a personal confession of his own struggle with inferiority. Despite Howe's opposition to orthodox psychoanalysis, he did not distance himself from the "word of Freud", as did Adler, but to deepen its meaning so as to cast doubt on its status as a label. It was not the word itself that displeased Howe, but its trivialization.

Howe's psychology of the inferiority complex was much more complicated than what was generally presumed by the public during the 1940's. Howe used the term inferiority complex to describe Adler's inferiority (feeling) complex, inferiority (symptom) complex, and superiority complex. Why did Howe not differentiate between these issues, as did Adler? For Howe, all three problems fell under the same matrix, namely that they can all be characterized as beginning from an intense feeling of inferiority that has become intolerable. Adler made the distinctions he did because he placed emphasis on what the individual does with his inferiority feelings; his choice of attitude or life-style. In Howe's psychology,

the distinctions need not be made since the psychological foundation was the same for all.

Adler also emphasized the element of time in his classification of the complexes. As mentioned before, both Howe and Adler agreed that the foundation was the intense feeling of inferiority, but Adler felt that the longer the consequences of the feeling persist the greater chance there is for the inferiority (feeling) complex to develop into an inferiority (symptom) complex. Adler's implicit idea of rank according to severity was foreign to Howe. Howe did not see a progression from feeling to symptom to superiority. Adler's classification system, from Howe's perspective, may itself carry the seeds of an inferiority complex, as the very notion of rank contains the basis for the superiority-inferiority distinction. In Howe's treatment of an inferiority complex, when the dimension of experience that he called the "C-factor" is discovered, "high" and "low" lose their positions.

For Howe, superiority is the unconscious defense against the intense feeling of inferiority and did not constitute a separate complex. Both Howe and Adler agreed that the feeling of inferiority and the striving for superiority are complementary. Yet, Adler believed that both, as two separate complexes, could exist together in the same individual. Adler suggested that when we see an inferiority (feeling) complex we might find a hidden superiority complex (Adler, 1964, pg. 259). This "hidden superiority complex," from Howe's perspective, is part of the same inferiority complex that was present from the start. Inferiority

and superiority are complimentary and form parts of a whole. The disease is the same even though it affects different parts of the body. Likening the inferiority complex to a cancer, the cancer begins in one area and metastasizes to other areas. A person may have skin cancer that spread to the lungs. Yet, when that person dies, we say that he died from skin cancer, the place of the cancer's origin.

Both Howe and Adler deplored the dominion of orthodox psychoanalytic theory during the 1920's, 30's, and 40's, but each man's response led him a different direction. While Adler was led toward the development of his own school, Howe was led toward the exploration of mysticism, Asian philosophy, and Existential-Phenomenology. Of course, Howe made use of them in such a way that they would still stand on their own. Thus, they were not used only as a *support* for psychoanalytic theory or the practice of psychotherapy. He felt that these wisdom traditions had powerful things to say about man's spiritual nature – an aspect of existence that was being distorted, misconstrued, or even overlooked by many psychoanalysts of his day. Because of Howe's idiosyncratic use of these wisdom traditions, he is, in terms of his relationship to Freud, at the remote boundaries of the dissident fringe. Even though Adler's personal distaste for Freud was much greater than Howe's, Howe is situated further away from Freud than is Adler, even though both Howe and Adler can be classified within the dissident fringe. Howe never made personal attacks against Freud, but he disliked Ernest Jones, who was the English representative of orthodox Freudian thought.

And, it was certainly the case that Freud himself had a dogmatic side, demanding at times what seemed to be an unquestioning allegiance from his disciples.

Adler can be classified within the dissident fringe, in large measure, based on his personal relationship with Freud. Just as Adler disliked Freud, Freud also disliked Adler occasionally referring to him as, “That little man.” However, Adler’s “Individual Psychology” is more similar to Freudian thought than is Howe’s psychology, even though Adler sought to overturn many of Freud’s premises.¹⁴ I don’t believe Adler actually succeeded in his attempt. In many places throughout his writings, Adler inadvertently supports Freud. Adler’s opposition stemmed from his interpretation that Freud insisted on a literal, biological interpretation of penis-envy that, for Adler, could be understood more socially.¹⁵ While Freud can certainly be viewed as a “biologist of the mind,” he was one of the first to point to the powerful socio-cultural forces that shape the unconscious.

Because of the mutable nature of Howe’s thought, it would be erroneous to label his psychology as a “relational” psychology or a “spiritual” psychology. Yet, he was not concerned with classifying either himself or his ideas. Healing his patients was good enough for him. If posterity overlooked him, he would drift into obscurity, as long as he contributed to the alleviation of his patients’ suffering.

¹⁴ According to Burston (2005), “Freud and Adler are both alike in that they both sought to uncover the “core complex” or “nuclear complex of the neuroses” – the singular, or at any rate, primary root of all forms of psychopathology. For Freud it was the Oedipus complex (i.e. incestuous libido), for Adler, inferiority feelings” (Personal Correspondence).

¹⁵ From a feminist perspective, Adler’s interpretation of penis envy as a social phenomenon is based on the fact that it is an artifact of a male-dominated socio-cultural political ideology that creates hegemonic structures based on gender distinctions.

Thus, Howe (figuratively) died with many of his patients. Yet, a man such as Howe should be both remembered and honored, as his “voice” still speaks to us though his works.

Concluding Remarks

According to Howe, the inferiority complex makes war inevitable, as it demands peace through tyranny. Peace can never come through tyranny, as there will always be a degree of phoniness or falseness about it. Yet, ultimately, that is what an inferiority complex wants. To have true peace requires balance; balance in oneself as well as in one’s relationships. And, for peace to be a possibility one ultimately has to possess a submissive attitude. The submissive attitude is the very opposite of an inferiority complex. Submissiveness seeks that which is high in that which is low and that which is low in that which is high. A person with an inferiority complex, in Howe’s view, creates peace for himself at the expense of the other. He is tyrannical in his relationship with himself and with others. He feels “good” by making the other feel “bad.”¹⁶

For Howe, dishonesty is a hallmark of the inferiority complex, not just dishonesty in the sense of telling a lie to another, but lying on a profound level to oneself. It is a form of self-deception with potentially disastrous results. The inferiority complex, as self-deception in Howe’s view, is “the exact opposite to the scientific method, common sense, good humor, and Christianity (Howe, 1949, pg.

¹⁶ However, on an unconscious level, he identifies with the feeling that he creates in the other.

187), each of which, according to Howe, are characterized by their intuitive grasp of truth. Howe likened the inferiority complex to a tool for “evil” to use as needed:

As a deceptive ever-present plague it is the very Devil: and yet it is not evil in itself. But if evil were to need a tool always at hand, an instrument perfectly adapted to its evil purpose of exploiting, deceiving and destroying good, then I believe it can find all that it could ever hope for in the unconscious defense mechanisms of the inferiority complex (Howe, 1949, pg. 187).

Wilhelm Reich, in several of his books, most notably in *Character Analysis* (1980) and *The Murder of Christ* (1953), described what he called an “emotional plague.”

For Reich, the emotional plague was ultimately responsible for schizophrenia, cancer, and the death of Jesus. Yet, what did Reich exactly mean by the “emotional plague?” For Reich, it consisted of the repression of sexuality, and also, the repression of the expression of life. In Reich’s view, throughout history, those that embodied this life principle, like Jesus, Bruno or Nietzsche, were imprisoned, killed or driven insane by the repressive forces that existed within society. Though not identical, of course, Howe’s “ever-present plague” (the inferiority complex) is reminiscent of Reich’s “emotional plague.” Those with inferiority complexes, according to Howe, are often found in positions of authority, such as, politicians, lawyers, doctors, religious leaders, teachers, etc. Ultimately, they are the authors of society and the writers of history. They have the “power” or “authority” to decide the parameters of acceptability. Thus, the power structure in any given society may reflect a collective inferiority complex.

CHAPTER 5

Howe's Psychology of Love

Love, in its infinite variety, does not necessarily imply the existence of a relationship. If love is allowed to be a personal experience, it must also be allowed to exist in infinite and ever changing variety, according to the difference in place, mood, and person of the other. In fact, there are as many kinds of love as there are of lovers (Howe, 1965, pg. 91).

- Howe in *Cure or Heal?*

Howe's Psychology of Love

Throughout history, man's "divided nature" has taken on a pejorative connotation. In many wisdom traditions, the "fall of man" is as a result of his fundamental division, or separateness. Yet, from Howe's perspective, if not for this division, if not for Adam and Eve falling into temptation, man would not seek to return to the Source. It can be argued, that if man had simply obeyed and submitted to God's will from the beginning he would not have to return. Man's divided nature, or separation from himself, others, and God, according to Howe, begins the process of awakening from a false sense of relatedness. Thus, it was not that the paradise of Eden was false, but there was something false about Adam and Eve's relationship to it. Something had to occur so as to disrupt this falseness, something that would separate man from his own ignorance. God ordained that the serpent tempting Adam and Eve to eat from the tree of paradise. The "punishment" they received was, in actuality, a blessing for all of mankind. Through a process of suffering, conversion, redemption, and liberation we have

the opportunity to return to the Garden, not in the unaware condition of Adam and Eve, but in the awakened state of Adam Kadmon, Yeshua Messiah, macroanthropos, and Buddha. Hence, the Garden itself does not appear to be the same, since man, in his return, has undergone a metamorphosis, changing himself, the Garden, and his relationship to everything in it.

The point of the previous reflection was not to illustrate the implication for Howe's thought for theological discourse. Rather, the purpose was to demonstrate a parallel between the fall and return of man (spiritually) and the process whereby a patient becomes healed from psychological sickness. For Howe, psychological sickness, as it presents itself in depression, anxiety, the inferiority complex, etc., signifies that the patient's "past habits of thought, accepted authorities and agreeable ways of life" are breaking down. Psychological sickness, according to Howe, suggests that "something has been left out, and it is for this mysterious factor that we are now searching" (Howe, 1965, pg. 19). The patient becomes divided from his habits, accepted authorities, and agreeable ways of life through the particular malaise that affects him. The type of psychological sickness says something meaningful about the manner in which he was divided. Simultaneously, it harbors the very seeds of healing. Therefore, in Howe's view, as psychotherapists and as unwilling victims of our own psychological sicknesses, we must pay close attention to their specific phenomenology. The phenomenology of the sickness tells us something about what is missing, the "mysterious factor that we are now searching." According to Howe, this

“mysterious factor” is not necessarily the same for everyone. It will differ according to the person’s unique history, temperament, socio-cultural background, etc. However, there is a common element that cuts across history, space, and time. Once discovered, and subsequently lived, this “mysterious factor” restores wholeness, it returns the person to the Source. Instead of returning him to his “pre morbid personality,” his neurosis makes him stronger, more grounded, more authentic, and aware. Metaphorically speaking, he had to “die” so that he could be “reborn.” He left the Garden as a man and returned as a god. It is not that he will no longer suffer, but he will now suffer willingly and with purpose.

Is love the “mysterious factor”? If it were, then there would be no more mystery. And for Howe, it is important for both psychotherapists and patients to accept the mystery and to ultimately not know what it was that healed us. In terms of love, we seek to experience it directly but never to define it. In actuality, love can never be defined; its very nature is mysterious, indefinite. Howe stated that love exists in an “infinite variety.” Moreover, in his own words,

Essentially, primarily or originally, LOVE is a non-dual unmotivated REALITY. Here GOD is equated with LOVE, and both with primary CONSCIOUSNESS. Here is the centre and axis of our circle or sphere of PERSONAL BEING, where I AM THAT I AM, and my FATHER and I are ONE (Howe, 1965, pg. 91).

It is in *Cure or Heal?* where Howe first made use of capital letters to differentiate between various levels of significance:

New ways of thought require the breaking down of old mental habits. I have therefore made use of CAPITALS and half-Capitals to distinguish shades of meaning which the same words, making the same sound, cannot

distinguish. Thus SELF-LOVE means in this text something different from self-love, as SELF (central) is different from self (peripheral) and LOVE (heavenly) from love (earthly). The exact difference in meaning must be left to the reader's capacity to discover it in terms of his own experience (Howe, 1965, pg. 20).

Howe, in his later works such as *Cure or Heal?* (1965), *She and Me* (1974), and *The Mind of the Druid* (1989), used written language in an attempt to help his readers think in unaccustomed ways. Martin Heidegger, did much the same thing in his later writings, such as, *What is Called Thinking?* (1976), *On the Way to Language* (1982), *Contributions to Philosophy* (1999), and *Poetry, Language, and Thought* (2001).¹⁷ While Howe was certainly influenced by Heidegger, especially the Heidegger of *Being and Time* (1996), he did not imitate him either in style or in content. Like Heidegger, Howe was interested in a kind of poetic, meditative, non-reductive, non-dualist form of thinking. According to John Heaton (2003), Howe did not believe that meditation was a technique, but was similar to Heidegger's meditative thinking, as found in his later works (Personal Correspondence). That said, however, Heidegger's poetic, meditative thinking (denken) was more or less a return to both Heraclitus and the German poet Holderlin, while Howe's meditative thinking was more in line with Krishnamurti's idea of choiceless awareness. Both Howe and Heidegger sought to clear the mind of "old mental habits," or reductive, reifying modes of thought, but did so in radically different ways. Heidegger's style was dense and highly technical,

¹⁷ Heidegger did not use CAPITALS as did Howe, but wrote in a poetic, non-dualistic way that mystified many of his readers.

whereas Howe's style, especially in his later works, was simple and direct. Yet, Howe's simplicity of style should in no way be confused with easy comprehension. Like Poe's purloined letter, what is most apparent is often what is most overlooked. As soon as knowledge is assumed, that is when it is missed. When Howe used CAPITALS to distinguish "shades of meaning" between words such as LOVE and love, he did not say (exactly) what the difference was. The difference cannot be stated absolutely, as if to assert that the difference is the same for everyone. The meaning will differ depending on the individual, unique relationship to the words that the reader brings in his encounter with the text. Thus, when Howe attempted to answer the question, "What is Love?" he unveiled his own personal experience with the word. Yet, part of his experience is connected with our own, as we partake in a common heritage.

According to Howe, GOD and LOVE, on a primary level, are coequal. The Gospels and the Epistles of St. Paul state the same: "God is Love." Yet, Howe's assertion was not simply a restatement of the Christian message. Howe further elaborated by stating that GOD (LOVE) is "equated with primary CONSCIOUSNESS." It was in *The Triumphant Spirit* (1943) where Howe introduced his understanding of consciousness. As discussed earlier, consciousness for Howe was not simply a state of awareness, but a way to pay attention to the contents of the psyche. Consciousness is not the same as CONSCIOUSNESS. Consciousness is personal whereas CONSCIOUSNESS is transpersonal. Thus, it is important not to confuse consciousness with

CONSCIOUSNESS, the personal for the transpersonal. The shades of meaning here illustrated are significant. CONSCIOUSNESS (LOVE) is the center of PERSONAL BEING, “where I AM THAT I AM, and FATHER and I are ONE.” “I am that I am,” said God when Moses asked his name. This phrase is similar to Advaita Vedanta’s “Thou Art That.” Ramana Maharshi even stated in *Talks with Ramana Maharshi*:

“I am” is the name of God. Of all the definitions of God, none is indeed so well put as the Biblical statement “I am that I am” in Exodus (Chapter 3). There are other statements, such as *Brahmivaham*, *Aham Brahmasmi*, and *Soham*. But none is so direct as the name *Jehovah = I am* (Maharshi, 2000, pg. 102).

“I and the Father are One,” said Jesus in John 10:30. Jesus’ “I”, “Father,” and “One” are similar to Howe’s FATHER, ONE, and I. At the very center of BEING, all are undifferentiated. And importantly for Howe, the undifferentiated state of BEING begins to unfold as a process of differentiation at birth:

From the moment of departure from our point of origin at birth, there occurs differentiation and extension into pairs of opposites, with the gradual ability to make relationships with a variety of opposites, including persons, and to experience a variety of differentiated ‘lovings,’ ‘hatings,’ or ‘indifferences’ (Howe, 1965, pg. 91).

Implicit in Howe’s statement is a theory of development. As with the Indian philosopher Sri Aurobindo, Howe suggested that as we evolve psychologically from the place of undifferentiated BEING to differentiated being, we learn to make distinctions between one thing and another and to classify things according to type. Moreover, the ego goes from fusion (a prepersonal state of awareness) to separateness (a personal state of awareness). And, it is through the ego’s

separation from the world that it is able to form a relationship to it. Without the evolution from fusion to separation, relationship would not be possible. So, according to Howe,

Life goes on, from innocence through growth perhaps to wisdom, but perhaps also to ignorance and guilt. Life proceeds from REALITY to reality: from PERSON to person: and from LOVE undifferentiated to love, particular or differentiated. In general the process of development is from the non-dual to the dual, from the protopathic to the epicritic, from potential to actual, and from ABSOLUTE to relative (Howe, 1965, pgs. 91 & 93).

From a superficial perspective, it may seem that Howe was romanticizing the prepersonal, undifferentiated state. Yet, that was not the case. Ken Wilber has often criticized Jung (and Jungians) for making what he calls the “pre/trans fallacy.” Basically, when a theorist commits the pre/trans fallacy he is confusing the prepersonal for the transpersonal. Freud made the opposite error when he reduced all transpersonal states to prepersonal phantasies. Neither Jung nor Howe committed the pre/trans fallacy. Both were aware of the important distinction between transpersonal CONSCIOUSNESS (SELF) and prepersonal awareness (non-self). Psychological development from the non-dual to the dual is not synonymous with developing from the divine to the human. Hence, we don’t begin as GOD and then become man through an unfortunate process of psychic evolution. The type of omnipotence that is present during the early, pre-egoic stages of development must be dis-identified with. According to Howe, for normal development to continue without fixations or identifications at the

prepersonal stages of development it is important for omnipotence to be “lost.”

What happens then when omnipotence is not lost? Howe (1965) wrote:

If he (the infant) does not lose his omnipotence, if he clings to it and will not give in to life: if he is ‘spoilt’, in fact, he becomes either a spoilt child, or in more severe degree, a delinquent, a psychopath, or a schizophrenic (pg. 93).

Howe’s use of the word ‘spoilt,’ in this context, was specific and was not to be confused with the everyday understanding of the term. In *Mysterious Marriage* (1949), Howe wrote that the spoilt child feels entitled to a state of “perfect happiness, bliss” (pg. 129). Thus, he is so called because he wants to retain the state of omnipotence, or continue his identification with the pre-egoic world. His phantasy of omnipotence can be characterized as intrauterine. Howe’s developmental psychopathological theory begins with the child being stuck at a pre-egoic state of consciousness in which he is, to some degree, psychologically undifferentiated. The severity of pathology is contingent upon the degree of undifferentiation. For Howe, the more psychologically undifferentiated a person is the more he clings to his phantasy of omnipotence. In less severe cases, the person is able to maintain a connection with reality. In the case of a child, he is simply spoilt, in the everyday sense of the term. He is used to getting what he wants when he wants it. Thus, his omnipotent phantasy gets continually reinforced. In severe cases, the connection with reality is lessened. Yet, for Howe, even psychopaths (sociopaths) have the ability to “stay in our world.” If they are rich, they can impulsively buy what they want, not having to worry about

limitations (boundaries). Hence, money is the medium by which the pre-egoic, omnipotent phantasy is maintained. Wealth gives the psychopath the illusion that he is all-powerful, that there is nothing that is beyond his grasp. Moreover, it prevents him from acting out in a delinquent fashion. From all appearances, it would be virtually impossible to detect his psychopathy. Howe (1965) wrote, “For given enough money no one can be a psychopath” (pg. 93). With little wealth, however, the psychopath finds himself in a precarious position. He cannot easily reinforce his omnipotent phantasy by legal means. Furthermore, parents, significant caregivers, and friends may not be present to repeatedly remind him of his all-powerful nature. Therefore, according to Howe, “he behaves as if he can have what he wants by the simple process of taking it” (Howe, 1965, pg. 93). Like the defense of superiority that affects many patients with inferiority complexes, the psychopath treats others as if they were instruments, tools, and/or material objects. They become, in a sense, sites or platforms for the reinforcement of his omnipotent phantasy. By taking something from someone, overpowering the other, and victimizing the other, the psychopath intensifies his feeling of being omnipotent. Hence, it is not so much the (material) object that the other has which drives the psychopath’s delinquent behavior, but rather the feeling that accompanies its taking. In extreme cases, such as the schizophrenic, no longer is the phantasy of omnipotence merely clung to. It has been held so tightly that the phantasy is outside of the ego’s control. Thus, in a sense, it supplants the ego. By so doing, the schizophrenic, according to Howe, “contracts out of this-our-world-

here altogether, in favour of a better one” (Howe, 1965, pg. 93). Unlike the spoilt child and the psychopath, the schizophrenic does not reinforce his phantasy of omnipotence by getting or taking something from the world. The “our-world-here altogether” ceases to interest him, as its phenomena (human and non-human) do not function as platforms of reinforcement. The only way the schizophrenic can maintain his omnipotent phantasy is by creating a fictitious world to live in, a world that, in Howe’s estimation, is “better” for him, better in the sense that his omnipotence cannot be lost.

At this point, it may be useful to elaborate upon Howe’s distinction between *phantasy* and *fantasy*. Howe asserted that the former, “implies a motivated escape out of this world, but the latter enters into, and may be used to intensify, the reality of this-our-world-here, as is the case in drama and in poetry” (Howe, 1965, pg. 93). It is important to keep in mind that, for Howe, the motivation for phantasy can be either conscious or unconscious. In Howe’s later works, especially in the posthumously published *The Mind of the Druid* (1989), he shifted his emphasis toward the conscious motivation for phantasy and did not make mention of unconscious phantasy. He fine-tuned his earlier definition by asserting that phantasy is a “motivated escape from an awkward situation” (Howe, 1989, pg. 99). The “awkward situation” to which Howe referred is life itself, rather than any particular traumatic or threatening aspect of life. What makes life awkward, according to Howe, is that we are continually faced with the unknown. Thus, in order to cope with the associated anxiety, we create phantasies to provide

us with more security and comfort, in essence, to provide us with the illusion that we have some degree of control. Paradoxically, for Howe, the only certainty is death, which is the ultimate unknown. As a result Howe, sounding somewhat similar to Freud, asserted that we then invent the personal phantasy of eternal life (Howe, 1989, pg. 100). It is not that Howe denied that eternal life is a possibility, but he was well aware that for many, it functioned as a psychological defense against intense fear associated with death.

Howe's concept of phantasy does not denote a strictly unconscious process, as it did for Melanie Klein. Klein was one of the first psychoanalysts to make use of the concept of phantasy. For Klein, the 'ph' spelling indicates that the process is unconscious (Mitchell, 1987, pg. 22). Kleinian 'phantasy' is not synonymous with Freud's notion of psychic reality, as is often assumed. For Klein herself, phantasy was something different. For Freud, psychic reality is not innate but produced by the peculiar conditions of the human being due to the fact that our instincts are weak at birth. Human drives, which are the bases for psychic reality, come into being as a result of our weak instincts. Thus, the source for psychic reality is primarily external. For Klein, "phantasy emanates from within and imagines what is without; it offers an unconscious commentary on instinctual life and links feelings to objects and creates a new amalgam: the world of imagination" (Mitchell, 1987, pg. 23). Howe bridged the gap between both Freud and Klein. His is a psychology of the unconscious, while simultaneously a psychology of phantasy, based on both conscious and unconscious motivation.

Yet, he was more Kleinian in the sense that he recognized how omnipotence escapes into phantasy, especially during the pre-personal stages of development.

In terms of love, when omnipotence escapes into phantasy, when the object of affection cannot be had “within the world,” it finds satisfaction in the world of phantasy, a world, according to Howe, that is generally divorced from the this-our-world-here. As a result, the person or object of affection gets inflated and subsequently has more “reality” in the phantasy world than it does in the this-our-world-here. And, as can be imagined, the lover, in his relation to his now phantasized object, behaves in such a desperate manner that many of his actions border on insanity. For Howe, it is the element of projection that accounts for this process:

The element of projection which can take place from REALITY to reality, and from PERSON to person, accounts for the disastrous inflation and unreality which often causes ‘love’ to behave as if the lover is insane (Howe, 1965, pg. 93).

According to Howe, when we project this undifferentiated, original primacy of LOVE onto the beloved object, we are led to a state of identification. We identify with either all or some aspect of the beloved object and then “fall in love” with the ‘it’ that we imagine the “him” or “her” to possess. Of course, “falling in love” is an everyday occurrence, which Howe did not intend to pathologize. Rather, just as with the phantasy of omnipotence that is primary, in the sense that we harbor this phantasy at birth and throughout the pre-egoic stages of development, Howe pointed out that “falling in love” is not pathological unless

it becomes a feeling that the person wants to retain indefinitely. Thus, just as we must “lose our omnipotence” we must lose “falling in love” if our love is to grow and not remain immature and unrealistic. It is often the case that it is not only the lover that refuses to give up the fall into love, but parents as well. Mothers can be said to “fall in love” with their children. This initial stage of love is necessary in that it is conducive toward bonding and building up the infant’s sense of trust. However, if the mother tenaciously clings to the intense feeling that this love produces, then potentially harmful consequences may follow. Instead of feeling a bond and having a sense of trust, the infant/child feels smothered and develops either an unhealthy dependence on the mother or reacts with aversion to her. And, as Howe attested, this has a “shadow” side:

Such an identification-with-phantasy must of course imply a ‘shadow’ side, of dissociation-in-fact. It is this real state of conflict which accounts for the ambivalence of love/hate, which is so easily recognized by the loved one, but never the lover (Howe, 1965, pg. 94).

The loved one is never aware of how his phantasy affects his beloved object. He can’t be on account of his identification with his phantasy. He is so enraptured with his phantasy of the beloved that he cannot see how it makes the other feel. According to Howe, the lover’s shadow, his own ambivalence of love/hate, gets projected onto the loved one. For example, the infant, the child, wife, husband, etc. will experience this ambivalence and react accordingly. The reaction will vary depending on who is doing the reacting. Ambivalence, in the form of a mixed

message by the mother, has the potential to cause pathological splitting in the infant.

Howe elaborated upon Klein's idea by asserting that, for infants, "the touch of a hand, the tone of a voice, means what it means. And, if it means something different from the noise of the words spoken, we are receiving two communications at the same time. To which shall we adhere and owe our loyalty?" (Howe, 1965, pg. 95). Howe stated very simply, in phenomenological terms, what Klein stated in very abstract, highly technical object-relations jargon. When we read Howe's description of the ambivalence that the infant experiences, we can feel, along with the infant, the central conflict. And for Howe, the conflict is one of loyalty. The mother who provides for the infant's basic needs, but reacts with indifference or aversion when he reaches toward her is sending a mixed message. The father who repeatedly tells his daughter that he loves her, but is either physically or emotionally unavailable to show his love is sending a mixed message. Confusion abounds for both the infant and child in the aforementioned examples. According to Howe, the words/actions of the parent, based on the parent's own ambivalence contradict the infant/child's experience. Howe stated that the parent is often mystified when, for example, the child (unconsciously) resorts to physical and/or emotional illness and/or engages in delinquent behaviors as a means to express his reaction to the parent's projection. The parent imagines herself to be "full of love" and incapable of contributing to such a reaction in her child. She might say to herself and to others, "I am such a loving parent, so why

does my child seem to hate me?” For Howe, identification is not love. When the undifferentiated, original primacy of LOVE is projected onto the infant/child, it is far too much to handle, the heavy burden is unmanageable. It is impossible to see GOD (LOVE) and live. It is impossible to carry the weight of such a projection and remain whole.

As was previously stated, for Howe, love is infinite in the sense that it can take an infinite variety of forms. There are as many forms of love as there are individuals. However, according to Howe, love in its infinite variety can be classified into two types: differentiated (love) and undifferentiated (LOVE). As was stated earlier, LOVE (undifferentiated) is equated with GOD and both with primary CONSCIOUSNESS. It is fundamentally incommunicable, whole, and does not imply the existence of relationship. Love (differentiated), on the other hand, Howe (1965) wrote is a,

Communication, a relationship and an experience between different persons, who have engaged in discovering the reality both of themselves and of each other. Love is as infinite in its variety as it is uniquely different from person to person, and from time to time. As an experience, it is unknowable, undefinable and unrepeatable (pg. 98).

For Howe, we can paradoxically come to know the unknowable; we can come to know the “unknowable experience of love” through the psyche. This type of knowledge, in the sense that Howe spoke, is not akin to possession or mastery. Knowing love or knowing about love implies the preservation of its mystery. Love’s virtuous quality, according to Howe, “is to set the other free, and to let them be honoured and respected for themselves as they are” (Howe, 1965, pg. 98).

Howe divided the psyche (the ‘psychic house’) into four “instruments” of knowing, which correspond to the four elements: fire, air, water, and earth. Psychologically, each of the elements roughly corresponds to Jung’s four functions: intuition (fire), thought (air), feeling (water), and sensation (earth). Thus, the psyche comes to know love in four different ways. However, and importantly, we approach one another in love through the four instruments, but for Howe, we must remember that the “beloved is not what I apprehend even by using all of these. For she is all and more, in the person of her mystery.”

At this point, it may be helpful to provide Howe’s examples of the four types of love, or four ways of loving.

a) LOVE-IN-THE-ELEMENT-OF-FIRE:

“LOVE in the element of FIRE is naturally surpassing hot. On this level it is liable to be absolutely sure of itself, and of what it knows of the other; which, however, has never been derived from the evidence of experience and is not likely to be confirmed by it. This can be love at first sight, with a timeless, out of this world, quality. Oddly enough, having sprung so suddenly from Heaven, born complete and ready made, it may seem so bright and holy as to be quite unsuitable for earthly touch” (Howe, 1965, pg. 98).

b) LOVE-IN-THE-AIR:

“LOVE-IN-THE-AIR is boundless, free. The sky is the limit. It is highly romantic. It is usually painless, because it need never come down to earth, or be experienced (i.e. limited) personally...Like all ideas, love-in-the-air is a try-out, an innocuous experiment, before the facts of life bring the lovers down to earth” (Howe, 1965, pg. 99).

c) LOVE-IN-THE-WATER:

“LOVE-IN-THE-WATER finds itself in greatest danger, with all at stake. Of the four quadrants of our analysis of love, this may be

described as ‘dangerous corner’. Like its opposite of fire, water is also ambivalent. It brings both life and death, as its function is to fertilize and disintegrate...It is what is ‘between’ us, a conductor of our communications with one another” (Howe, 1965, pg. 99).

d) LOVE-DOWN-TO-EARTH:

“LOVE-DOWN-TO-EARTH – It is only in its earthly, measured state, that love can be fully realized. Love needs its time on earth, its physical structure and material form in which to be deployed and fulfilled. It is this very sense of limitation, which means disappointment at not-having-more, that gives occasion for love’s proof” (Howe, 1965, pg. 100).

Howe’s four loves, like C.S. Lewis’s in his book *The Four Loves* (1971), serve as windows through which we both understand love as well as love the beloved.

While Lewis’s loves have a distinctly Christian feel, Howe’s loves reflect the influence of Gnosticism and druidism. Yet, we glean from his writings that Howe was neither pagan nor druid, but basically Buddhist/Gnostic in orientation, and first and foremost an explorer of the psyche as it appeared in all guises - East and West, past and present, pagan and Christian. Howe’s psychic windows, like Lewis’s Four Loves and Jung’s typology, highlight aspects of experience. In the case of love, Howe was aware that we can use the four loves to “see through” but they also act as filters. Thus, they strip away aspects of experience and present to us a form of love that is differentiated. Each of the four loves translates the experience of LOVE. And, as is well known, meaning gets lost in the translation. As we move from LOVE to love, yes, something is lost but there is also something gained. We open ourselves to the possibility of sharing and giving love in relationship. We move from HEAVEN to earth, from PERSON to person. This

“fall” is what we must do in order to first be in love; without it love is not possible. As in falling asleep, falling in love implies that we give ourselves over to a power greater than our egos. It is the ego that falls; we diminish ourselves for the sake of the other, said Howe, to come together so that the “opponent parts,” self and other, “can enter the experience of the ‘transcendent third’, which is so much more than either can find in themselves” (Howe, 1965, pg. 107).

Howe stated the possibility that there may be more ways of differentiating love other than the four he listed. So, Howe’s reflections on love came full circle. Ultimately, we begin where we started. We can love one another in an infinite variety of ways.

Howe’s Relationship to Ian Suttie

Like Howe, Ian Suttie, was an early and influential Tavistock figure that was unjustly neglected because he was critical of psychoanalysis at a time when it was almost taboo to do so. Both Howe and Suttie committed “heresy” by describing clinical phenomena in ways that shunned the prevailing psychoanalytic filter.

Howe and Suttie worked at the Tavistock Clinic in the 1920’s and early 1930’s. According to Heaton, (Personal Correspondence, April 2003), Howe was deeply grieved by Suttie’s untimely death.¹⁸ Suttie “stayed in the consulting room to describe in phenomenological terms the understanding his patients gave him

¹⁸ Suttie died from a perforated ulcer in 1935, a few days before the publication of his first and only book *The Origins of Love and Hate*.

about their existential experience in different situations, the way they saw themselves in their own eyes and in the eyes of others” (Suttie, 1999, p. xxv). And in similar fashion, Howe subverted the psychoanalytic reification of persons by the manner in which he expressed his ideas.

Suttie was respected by many of his psychoanalytic contemporaries while Howe, for the most part, was not.¹⁹ John Bowlby, paid homage to Suttie in a new foreword to his book, in which he states, “when looked at historically, as an early contribution to an evolving discipline of personality development and psychopathology with an application in psychotherapy, Suttie’s *The Origins of Love and Hate* stands out as a milestone” (Suttie, 1999, pgs xvi-xvii). Yet, Bowlby was quite critical of Suttie for “alienating potential friends” by polemically critiquing Freud’s early metapsychology. Suttie, as well as Howe, were both working in a tradition created by Freud, thus according to Bowlby, “it is of far more value to spend time and energy advancing the favoured set of theories than to spend time criticizing those held to be inadequate” (Suttie, 1999, pg. xvii).

In this instance, Bowlby was exhibiting what Burston calls, “Freud piety.” Freud piety characterizes the attitude of the orthodox psychoanalysts, and among members of Freud’s “loyal opposition.”

Unlike Bowlby and the “loyal opposition”, Suttie was on the “dissent fringe.” Like Howe, Suttie was more concerned with being honest about his own experiences (and those of his patients) than simply “advancing the favoured set of

¹⁹ It is not to say that Howe was disrespected, but that he was ignored.

theories.” One could even argue that it was both love and hate that formed the basis for Suttie’s study, as well as his opposition to Freud’s early metapsychology. His reflections on love and/or hate often served as platforms for his critique of Freud. Thus, on a personal level, Suttie’s own ambivalence, his love and hate for Freud, was dispersed throughout *The Origins of Love and Hate*. By making Freudian psychology the focus for his book, Suttie inadvertently reinforced the orthodox attitude among many of Freud’s disciples.

Howe gave little space in his writings to a critique of Freud. The sparse references to Freud’s name throughout his works, even suggests indifference. The prevailing alternatives to psychoanalysis, as developed by Adler and Jung, for example, were rooted in their personal opposition to Freud. Howe wrote without inundating his books with references to (or quotes from) other authors. He did not feel the need to legitimize himself by leaning on (or refuting) the ideas of others.

Alternatively, it could also be argued that the lack of explicit referencing in Howe’s writings suggests his ambivalence to Freud. At a time when psychodynamically oriented psychotherapists cited Freud (either for or against) to lend credibility to their own insights, Howe’s refusal was not a polemic against Freud, but an attack on the orthodox, nearly religious attitude toward Freud. There were the faithful and there were the heretics. Howe was both (and neither).

In truth, however, despite differences in style, Howe “loved” and “hated” Freud, as much as Suttie did. Howe’s psychology of love showed fidelity to Freud, but simultaneously took psychoanalysis in a direction that would have made Freud

cringe. Freud would have considered Howe's use of the four elements as archaic, atavistic, and idiosyncratic. Suttie's psychology of love was also opposed to Freud's. Suttie disagreed with Freud's notion that love and hate are separate and independent from one another, only uniting in sadism and masochism. Instead he postulated that, "hate is the frustrated aspect of love" (Suttie, 1999, pg. 60), and thus, a secondary or derivative phenomenon, not a primary passion or "instinct", as it was for Freud.

As clinicians, Howe and Suttie were both psychodynamic psychotherapists who practiced phenomenology. They were not scholarly or intellectual phenomenologists in the sense that Husserl and Merleau-Ponty were, but phenomenologists in the sense that they described a patient's experience with the understanding that any theory about the experience is not the experience itself. The finger that points to the moon is not the moon, the menu is not the meal, and the raft is not the shore.

Concluding Remarks

For Howe, love always has its shadow side, namely, hate. Hate is not the "frustrated aspect of love" as it was for Suttie, nor is it independent from love, and only united with it in sadism and masochism as it was for Freud. According to Howe, we have "the need to hate." Hence, in certain respects, hate is necessary. This statement needs qualification. It is not as if the act of hating itself is important and to be retained and subsequently practiced. With Jung, Howe agreed that it was necessary to "accept the previously dissociated 'shadow' or 'bad'

aspect of experience” (Howe, 1965, pg. 103). And hate, as dissociated from love, needs to be accepted. Thus, according to Howe, “relationship and communication take the place of dissociation and alienation, and healing results automatically, if given the chance; through the acceptance of suffering, and in time” (Howe, 1965, pg. 103). Accepting hate requires that we be willing to experience it. To experience hate, for Howe, is not the same as embracing it. We don’t embrace or “hug” our shadow, but experience hate as the shadow side of love. As Howe attested, the safest way to experience hate is within the context of the therapeutic relationship. Howe saw the healing aspect of hate as expressed in the negative transference. The experience of hate and its possible expression (whether conscious or unconscious) toward the therapist is healing because so much of love’s shadow side is disallowed and repressed by society. Parents, at times, hate their children, and deceive themselves into believing that they *must* love them all the time. This tyrannical *must love* only strengthens its opposition, *must hate*. The hate that the parent does not accept increases the experience of hate, and the greater chance there is for it to be dissociated and projected on to the child. To accept one aspect of psychological life, the aspect that is “good” and “moral” for example, according to Howe, “falsifies the truth of one’s total emotional situation.” Howe (1965) wrote:

The general tendency of egoic parents to prefer good children to bad ones, clean ones to dirty ones, and loving ones to hating ones, still further falsifies the truth of the person’s total emotional situation. In general, and quite often, parents do hate one another, as they also hate their children! as their children do also sometimes hate them, and one another. By

subscribing to the general deception that either we actually do, or at least ought to, lone one another, egoic man and his moral 'establishment' are furthering a state of consequent ill-health, which they may subsequently try to cure. But they cannot possibly do so, until they are prepared to accept and suffer the conflict with the same shadow in themselves (pg. 104).

CHAPTER 6

Howe's "Selves" Psychology

Whether we are thinking of yourself, myself, or himself, there are always *at least* two of them. Since these two selves are related as subject and object, observer and instrument, they may be conveniently referred to as inner 'I' and outer 'me'.

E. Graham Howe in *I and Me: A Study of the Self* (1935)

Howe's Psychology of the "Selves"

The psychology and philosophy of the self has a long history. From the Atman in Hindu philosophy to the ego in psychoanalysis, the degree to which the self should be developed and/or transcended has been discussed for millennia. In the *Bhagavad Gita*, the *Upanishads*, and *Vedas*, the Atman is referred to as the "breath," "soul," or "vital principle." It is the divine spark that lies within all sentient and non-sentient beings. Through the process of meditation and/or yoga, the ancient Hindus believed that we discover that the self as identical with Atman. Thus, our identities are not confined to our individual egos, which function to separate self from world and self from others, but are united to the unitary principle that governs the entire universe.

The developmental theories of Freud, Erikson, Piaget, and Kohlberg, beautifully articulate the stages that lead to the development of the ego, but do not address the psycho-spiritual stages, the stages of involution that lead to ego transcendence, or the return to the Divine Ground of existence. The wisdom traditions, both east and west, past and present, provide a plethora of examples of

individuals who had attained states of consciousness that transcended Freud's genital stage or Piaget's formal operational stage of development. Individuals such as Lao tzu, Gautam Buddha, Jesus Christ, Ramana Maharshi, Dogen Zenji, and Jiddhu Krishnamurti attained to post-genital and post-formal operational thinking. The hallmark for post-formal thinking is ego (self) transcendence, whether it is on the subtle or causal levels of awareness/development. Orthodox Freudian theory would characterize the post-formal, subtle/causal levels of development as regressions to early, pre-egoic stages. Thus, according to Freudian theory, transpersonal states of awareness are in actuality prepersonal.

From Howe's perspective, we psychologically evolve from PRIMARY CONSCIOUSNESS and manifest (differentiate) into individual consciousnesses. We become identified with egoic consciousness and forget the SELF. Through a process of involution, we gradually disidentify with the ego and remember our identities as the SELF (Atman). Unlike Freud, and like Jung, Howe posited a distinction between the self (ego) and the SELF. Moreover, each stated that both the self and SELF were real phenomena. Hence, the self is not simply illusory but just as real as the SELF. This constitutes one of the major differences between western psychology and traditional Asian psychology. In traditional and some contemporary forms of Hinduism and Buddhism, the self is illusory and only the SELF is real.

For Howe, while there may be more than two selves, he posed at least two: the 'I' and the 'Me.' The 'I' is the ego and the 'Me', corresponds to what the

ancient Greeks called the *emauton* (Howe, 1935, pg. 44). When Socrates spoke of “knowing thyself” in Plato’s *Phaedrus* (1995) he was referring to the *emauton*.

The word “*emauton*” is also used throughout the New Testament. It can be found in Luke, John, and in St. Paul’s letters to the Corinthians, as when Paul writes of self-abasement. The *emauton* is the outer ‘me’ while the ego is the inner ‘I.’

Historically, says Howe, philosophers have gotten caught up in the debate as to which is real – the ‘me’ or the ‘I.’ Howe tries to settle the debate by saying that, not only are the ‘me’ and the ‘I’ both real, and have positive and negative aspects respectively. Moreover, he insists that only union of the ‘I’ and the ‘Me’ can lead to the emergence of the Self.

Those who only believe that the ‘I’ is real stand at what Howe called point A. And those who believe that only the ‘Me’ is real stand at point B. Thus, they can be said to identify with one self at the exclusion of the other. Moreover, they constitute, in a sense, two different ways of looking at the world: the ‘I’ way and the ‘Me’ way. This constitutes what Howe called the principle of “two-ness.”

Those who stand firmly at point B, dismissing the point of view of those who stand at point A, “describe themselves as hard-headed, matter-of-fact, plain spoken simple realists” (Howe, 1935, pg. 45). People at point A, who are primarily introverted, more immersed in their psychological worlds, and inner directed, are seen from the point B, “realist,” “sensible” perspective as being “lost in the clouds” and as “daydreamers.” An exaggerated example of someone at point A is the ancient Greek philosopher Thales, who was said to walk into a well

because he was so immersed in his own thoughts. At point B, we find materialists and atheists who may deny the existence of God because “it cannot be proven” and doubt the veracity of psychological and/or emotional realities. Howe called those who stand rigidly at any point, “idolaters” (Howe, 1935, pg. 45). Idolatry, in the form of B-worship, according to Howe, “is the religion of the superstitious, who take form for meaning, idol for ideal, and power for wisdom”(Howe, 1935, pg. 51). For Howe, those who stand firmly at point A claim that those who stand at point B are “living in a world of illusion” (Howe, 1935, pg. 45). This “illusory world”, from point A’s perspective, is akin to what the Hindus call, “maya.” In Hindu philosophy, if we conclude that the material world is real, that the sensory world is the only reality, we fall into a kind of perceptual delusion. We are deluded into believing that what is false (the material world) is real and what is real (the Atman) is false. At point A, we may find many so-called mystics and those that subscribe to anti-matter, new age philosophies. They may also be ascetics who deny the importance of the body as a means to be “spiritual.” For Howe, “those who stand at point A are liable to get ‘illuminated’, and that they may become difficult to understand because they are too far above the common herd of humanity to make themselves intelligible” (Howe, 1935, pg. 45). This is point A’s shadow side. While those who are inner directed, psycho-spiritually oriented, may experience enlightenment, or have moments of awakening, they may subsequently identify with these experiences at the cost of their engagement in the everyday world, and become unable to effectively communicate or relate to

others. They are high on their mountaintops, unable to see the valleys below.

“Heaven” is their only reality and the “earth,” and everything on it, is a fabrication.

While common sense may tell us that to solely identify with either point A (‘I’) or point B (‘Me’) is to believe in what Howe called a “half-truth,” he stated that we seldom, in practice, have a full, balanced approach to life, where point A and point B are complimentary, constituting a whole. Instead, we are sectarian, quasi-religious in our one-sidedness. We prefer to look at things from a single vantage point (either A or B) because, in large part, it reduces a significant degree of anxiety not to have empathized with an alternative perspective. If, by standing at point A, I believe that those who stand at point B are “wrong,” I create an in-group and an out-group. Everyone who does not view things from the perspective of point A lies outside the “circle of truth.” Thus, it becomes easier for me to split off and project the “bad,” “negative,” point B aspects of myself and retain the “good,” “positive,” point A aspects. I can then readily, with less anxiety, deal with the shadow side of my own point A perspective by acknowledging and addressing it in the point B out-group. Howe resolved the conflict between point A and point B, by citing that both points, in reality, form a relationship.²⁰ By first becoming aware of and then withdrawing the projection, we realize that through the principle of two-ness everything comes into being. Creation does not happen unless there are two. Howe (1935) wrote:

²⁰Relationship and not synthesis. ‘I’ and ‘Me’ are not fused together from Howe’s perspective. They unify and simultaneously retain and lose part of their identities.

In this relationship of the one and the two we can understand the genesis of all creation. Out of one, nothing can ever happen: there is no making or movement until it has been divided into its two-ness. Only out of two can there be born a child. That is why it is so important to become used to the language of paradox, the two-ness, because only out of that two-ness can anything ever be created. Only as a consequence of the union of those two parts of the dualism can there be born the third factor of the living child (pg. 47).

Again, Howe showed that we move from undifferentiation to differentiation.²¹ In the beginning, there is the One and then the One becomes Two and then the One and the Two unite and give birth to the Three. Howe likend point A ('I') to the mother and point B ('me') to the father and point C to the child. Howe stated that the creed of St. Athanasius was "on the right lines with its insistence upon Three in One and One in Three" (Howe, 1935, pg. 47). St. Athanasius was a 4th century Alexandrian theologian who is famous for his works *St. Anthony of the Desert* (1995) and *On the Incarnation* (1975). Both the Roman Catholic and Greek Orthodox Church canonized him. Moreover, he developed what became the foundation for all Christian churches, whether Catholic, Orthodox, and even Protestant. The Athanasian Creed states the Trinitarian doctrine, i.e., that the three persons of the Trinity form a unity. Similarly, in Howe's psychology,

For our sense of wholeness in discovered unity, there must be the One, the Two and the Three: the Two for parentage by the manner of their coming together, the One that is of them both, but still essentially and uniquely of itself...The only hope for the fullness of our sanity is that we should be prepared to recognize the two-ness of A and B and the third-ness of C; and the one-ness of the A and the B and the C (Howe, 1935, pg. 48).

²¹ Undifferentiation, in this instance, is not synonymous with PRIMARY CONSCIOUSNESS, or UNDIFFERENTIATED ONENESS.

According to Howe, we don't begin with the principle of 'two-ness.' Primarily, we don't start with the 'I' and the 'Me.' The 'I' and the 'Me', the mother and the father, emerge from the undifferentiated One. Howe called the undifferentiated one the "thing-by-itself," which is his "hypothesis of one-ness." The second hypothesis is the hypothesis of two-ness, or the "this-and-that in relationship." And the third hypothesis, the hypothesis that most interested Howe, is that of "three-ness," the mother ('I'), father ('Me'), and the child. (We can also say point A, point B, and point C respectively). For Howe, this hypothesis "postulates that we must always look for both A and the B separated, and then for the C, which is the meaning or outcome of that particular relationship" (Howe, 1935, pg. 55).

Importantly, said Howe, point A and point B, 'I' and 'Me' constitute two selves in relationship and not a Self. We make an idol of the Self by worshipping it as the self. To return to a previous analogy, we mistake the finger for the moon to which it points. The single aspect of differentiated two-ness must not be confused with undifferentiated one-ness. Howe (1935) wrote:

To regard self as any one-ness is to stick fast in the superstition of idolatry, and to become confused in a language of laboured inconsistencies, because this confusion of a false simplicity does not allow for paradox (pg. 56).

Paradox is to find meaning in what is an apparent contradiction. In Howe's psychology, we accept both sides of the contradiction. Thus, we don't attempt to resolve the contradiction by getting rid of any one side. Moreover, point A and point B do not disappear into point C. The mother and the father do not cease being parents when they give birth to the child. It is enough for the mother and the

father to “be in” the child and for the child to “be in” his parents. If, like Howe, we liken point A to the spirit, point B to the body, and point C to the soul, spirit and body give birth to the soul without giving up their properties.²² All three points of Howe’s trinity are important.²³

There are many paradoxical statements that we can analyze from Howe’s perspective. For Howe, in order to attain a degree of happiness we must recognize and accept the law of paradox (Howe, 1935, pg. 60). Let us take the paradoxical statement, “To be happy is to be sad” as an example. Furthermore, let us divide the statement into two parts. Point A corresponds to “To be happy” and point B corresponds to “is to be sad.” How is the contradiction resolved without denying one half of the assertion? Psychologically, is it possible to be both happy and sad? If the answer is no, then the paradox must be resolved in some other fashion. If the statement is rephrased as, “To know happiness is to know sadness” then it can be argued that happiness and sadness constitute a whole. One pole cannot be experienced without the other. Sadness forms the basis for happiness and happiness forms the basis for sadness. Thus, instead of having A and B, we have AB. The unification of A (happiness) and B (sadness) gives rise to C (the way leading to the middle path between the two opposites). In the case of Howe’s paradox of happiness, the middle path would be akin to Aristotle’s *eudaimonia*.

²² Undifferentiation, in this instance, is not synonymous with PRIMARY CONSCIOUSNESS, or UNDIFFERENTIATED ONENESS.

²³ In the Christian Trinity, the Father, the Son, and the Holy Spirit are all equally important. It would be blasphemous to most Roman Catholics, Greek Orthodox, and Protestant Christians to acknowledge the existence of one person of the Trinity and deny the others.

Eudaimonia can be translated as “contentment.” And, for us to be content, according to Howe, we must practice acceptance. Other examples, such as, “To Live is to Die,” “We find the self by losing the self,” “Effortless effort,” and “Wayless way” could equally illustrate Howe’s paradox – the unification of two opposing meanings produces a mysterious third that resolves the original paradox. And for Howe, this was not some nifty philosophical exercise, but a profound psychological reality that leads to healing.

To return to Howe’s hypothesis of two-ness, keeping in mind the previous example, point A (the inner self) unites with point B (the outer) self (in wholeness) to produce the all-inclusive C (Howe, 1935, pg. 60). C can be appreciated as the midpoint between points A and B. It is the site of the *coniunctio*; it is the place where the Self emerges. Simultaneously, it is for Howe the quality of the relationship between the inner self and the outer self, the feminine and masculine, mother and father, and heaven and earth. For Howe, the quality of any unification of opposites always leads to wholeness, which is the goal for both psychotherapy and life in general. Yet, it is important to mention that according to Howe point C leads to wholeness and gives birth to the Self but is not in and of itself wholeness or the Self. Thus, from Howe’s perspective, it is possible to be idolatrous at point C just as it is with points A and B. The birth of point C should not be interpreted as finality or the end of the journey, but as a sign that the end is near. Ultimately, according to Howe, all three points must be “merged into the wholeness of the balanced four” (Howe, 1935, pg. 231). The inner self, the outer self, and the

meeting place between the two all lose their separate existences. Separateness dissolves as the selves return to the ground from which they came. The circle from undifferentiated ONENESS to differentiated oneness to differentiated twoness back to undifferentiated ONENESS is complete.²⁴ Visually, the cycle of WHOLENESS can be compared to a circle. We have three points, A, C, and B, which constitute a straight line. When the cycle is completed, a vertical and a horizontal line extend from point C thereby creating a circumference around the three points, consequently taking them into itself. In order for the mission of Calvary to be complete, for the cross to become a crucifix, Jesus has to die to himself in order to become Christ. It is the body of Jesus that transforms the Trinity into a Quaternity. Thus, the way of wholeness is the way of death. Howe (1935) wrote, “There were two, there are three, but always the reality is four” (pg. 232).

Howe's Relationship to C.G. Jung

For both Howe and Jung there is a difference between the ego and the Self. Unlike Howe, Jung explicitly states that both the ego and the Self are archetypes. Yet Howe did not deny the archetypal nature of the Self. Howe often spoke of the Self *as if* it were an archetype, but without labeling it as such. In reference to the distinction between the ego and the Self, Jung wrote:

Investigation of the psychology of the unconscious confronted me with facts which required the formulation of new concepts. One of these

²⁴ In the Christian Trinity, the Father, the Son, and the Holy Spirit are all equally important. It would be blasphemous to most Roman Catholics, Greek Orthodox, and Protestant Christians to acknowledge the existence of one person of the Trinity and deny the others.

concepts is the self. The entity so denoted is not meant to take the place of the one that has always been known as the ego, but includes it in a supraordinate concept (Jung, CW: 9,pg. 3).

Howe, like Jung, saw the “investigation of the unconscious” as the primary task of the psychotherapist. While this seems to be an obvious statement that requires no explication, it is important to keep in mind that both Howe and Jung were in conflict with orthodox psychoanalysis for most of their professional lives.²⁵ For both men, the unconscious was not merely a construct or a theoretical abstraction. Howe and Jung both found themselves confronted with the unconscious as a psychic reality, one that transcended the theoretical boundaries that had been imposed upon it by orthodox psychoanalysis.

Jung’s initial and major disagreement with Freud was with his concept of libido. This disagreement ultimately led to Jung’s parting with Freud. In *Symbols of Transformation* (the much revised version of the *Psychology of the Unconscious*), Jung stated that libido was more than just sexual energy, as Freud and his disciples claimed. Prior to 1912, Jung was considered one of the orthodox, and more importantly, Freud’s heir apparent. Yet, as a result of his experience with patients and research into the wisdom traditions and ancient mythology, Jung could no longer deny the totality of the psyche. From Jung’s perspective, Freud and his early disciples, fell into what Howe would call a one-sided belief, a *doxa* predicated upon a “half-truth,” which ignored vast areas of the psyche. For Jung, libido was psychic energy as a whole, not just sexual energy. Howe agreed with

²⁵ Jung and Freud were aligned from 1904-1909.

Jung's position on the unconscious. For Howe, the unconscious could not be reduced to one of its aspects. Moreover, in Howe's psychology, any form of reduction, by identifying an experience with its term, missed the import of the aspect of psychic reality being expressed.

Just before and for several years after his break with Freud, from 1913-1918, Jung went through a prolonged personal crisis described in *Memories, Dreams, Reflections* (1989). As a result of his journey into his personal unconscious as well as the collective psyche, Jung experienced a kind of psychological death and rebirth that eventually led to his pioneering research into the psychology of religion, synchronicity, alchemy, and the archetypes of the collective unconscious. Thus, his psychology is a "personal confession," albeit not one based on the events of his personal history, but a different kind of self-disclosure evoked by his experience or encounter with the collective unconscious.

Howe never had a personal relationship with Freud, as did Jung; therefore, his "break" did not happen in the same way. To begin with, Howe was never part of Freud's inner circle. As was stated earlier, Ernest Jones invited him to join the British Psychoanalytic Society but Howe refused, not on account of his rejection of psychoanalysis, but because of his personal dislike of Jones. This event, led to Howe's separation from the psychoanalytic establishment. At the time, refusing an invitation to join the British Psychoanalytic Society was akin to career suicide. It was an honor to be invited and those who were invited accepted the invitation. For Jones to invite Howe, he must have appreciated his merit as a psychoanalyst

and saw him “worthy” of the honor. More than likely, Howe’s refusal also had something to do with his own protean and eclectic spirit. The dynamic psychology of the Tavistock Clinic appealed more to Howe than the British Psychoanalytic Society and its orthodox application of Freudian jargon. To accept Jones’ invitation would mean that Howe would have to compromise his principles. From his writings, it can be gleaned that Howe was a principled man whose practice of psychotherapy was not just an occupation but also a vocation and a way of life.

To revisit a question we asked in the Introduction: Why did Jung’s break with Freud lead to the development of his own school, analytical psychology, while Howe’s refusal of Jones’ invitation lead to his being ignored by history? As was briefly stated, Howe was anti-systematic. Yet, it can also be argued that Jung was anti-systematic as well. The major difference is that Jung’s writings can be read, as constituting a system, while Howe’s cannot. Some of the early works on Jungian Psychology, such as Jacobi’s *The Psychology of C.G. Jung* (1973), systematized Jung’s thought. When I say “systematized,” I mean specifically that Jolande Jacobi broke down the whole of Jung’s psychology in terms of its major component parts, i.e., conscious and unconscious, attitude types, libido, persona, dreams, archetypes, etc. Thus, it was much easier for a Jungian “lexicon” to be developed. The birth of any system is based on a specific language, a way of speaking about phenomena that separates it from other competing systems. Jung’s psychology, which is primarily a psychology and phenomenology of the totality of

psychic experience, in actuality, transcends the lexical use of even Jung's own core concepts. Built into Jung's "system" is an anti-system and built into his anti-system is a system. This is more than just an interesting play on words. It reflects the fact that neither Jung nor his psychology can be labeled, pinned down, or reductively identified. For instance, a psychologist who writes about Jung or Jungian thought theorizes that Jung was primarily a psychologist, a mystic who writes about Jung may suggest that Jung was primarily a mystic and an occultist may suggest that Jung was primarily an alchemist. Despite the fact that Jung himself claimed to be a "doctor," "psychologist," and "phenomenologist" who wrote about alchemy, spiritual experience, and religion, we must not assume that Jung was simply identifying with these terms. While Jung was all three, he cannot be reduced to any one.

While both Howe and Jung were eclectic and comprehensive in their respective approaches to the "investigation of the unconscious," Howe was more protean. There is more paradox, more (real or alleged) "inconsistencies" in Howe's thought making him more difficult to read despite the fact that his style is simpler than Jung's. For instance, there are times when Howe seemed to affiliate himself with Freud or orthodox Freudian thought and there are other times when he and Freud could not be further apart. In Jung's thought, from *Symbols of Transformation* onward, we find more consistency and coherency, not only in the manner in which his ideas are presented, and in the ideas themselves. Hence, it is easier to situate Jung within the history of psychoanalysis because his positions are

more easily discerned. The paradoxical quality in Howe's thought reflects his ambivalence in relation to Freud and orthodox psychoanalysis.²⁶

To return to Jung's understanding of the ego, he stated that, "the ego, as a specific content of consciousness, is not a simple or elementary factor but a complex one which, as such, cannot be described exhaustively. Experience shows that it rests on two seemingly different bases: the *somatic* and the *psychic*" (Jung, CW: 9, pg. 3). As was previously indicated, Howe asserted that there were two selves: the 'I' and the 'Me'. The 'I' roughly corresponds to Jung's psychic base of the ego and the 'Me' roughly corresponds to his somatic base. Yet, Howe's 'I' and 'Me', point A and point B, differ from Jung's concept of the ego in that Howe is positing the existence of *at least* two selves. Jung's ego has two aspects while Howe's ego, as the 'I', is a separate self. Howe reached his conclusion about the 'I' and 'Me' as separate selves due to their radically different orientations and identifications. For Howe, the totality of the psyche includes two or more selves in relationship to the Self. For Jung, the totality of the psyche includes a single ego with two aspects and the other archetypes in relationship to the Self.

Both Howe and Jung are in agreement that the selves (Howe) and the ego (Jung) are, in Jung's words, "subordinate to the Self and (is) related to it like a part to the whole" (Jung, CW:9, pg. 5). Thus, the selves (Howe) and ego (Jung) are not separate from the Self but part of it. For Howe, the Self is a term that refers

²⁶ Jung too was ambivalent in his relationship to Freud, as can be demonstrated in his early works. However, as his thought developed, he became decidedly less ambivalent and clearer in presenting his own system as distinct from Freud's.

specifically to what he called the “unity of wholeness.” Howe’s “unity of wholeness” is similar to Jung’s understanding of the Self as the “total personality.” In Howe’s “unity,” the ‘I’ and the ‘Me’, as differentiated aspects of the Self, merge into the undifferentiated Self. Thus, the position of subjectivity shifts from one or more of the selves to the Self. This type of subjectivity, or way of knowing, in Howe’s thought is akin to gnosis. Psychologically, gnosis is the awareness of the essential unity of the psyche, or in Jungian terms, it is the act of being conscious of the total personality. In mystical terms, it is the awakening to the divine within; it is the awareness of one’s fundamental identification with the Christos and Sophia.

Jung did not believe that the Self could be fully known (Jung, CW:9, pg. 5). And, in certain respects, this was true for Howe as well. At one stage of the journey toward wholeness, the Self functions as a symbol, which according to Howe constitutes “our hope” (Howe, 1935, pg. 49). Thus, the symbols of the Self, i.e., Christ, Buddha, mandalas, UFO’s, medicine wheels, etc. serve as sources of inspiration along the way. More than that, they appear in our dreams and fantasies to guide us toward essential unity. They may appear during times when the psyche is imbalanced when awakening is near.

According to Jung, while the Self cannot be fully known, wholeness can in fact be experienced: “What at first looks like an abstract idea stands in reality for something that exists and can be experienced, that demonstrates its a priori presence spontaneously” (Jung, CW:9, pg. 31). Moreover, the experience of

wholeness seems to come from without; it may appear as an external phenomenon, because it is independent of any of the differentiated selves. From Howe's perspective, because wholeness can be experienced, the Self, if only for brief moments, can be fully known. Hence, self-gnosis is not something that occurs once during a person's lifetime and then permanently changes the psyche. These moments of awakening can happen many times during a person's life. And with each experience, consciousness is enlarged.²⁷ Gautam and Jesus became Buddha and Christ respectively because their experiences of wholeness were more frequent and intense than their contemporaries. As they became more identified with the Self, they forgot themselves as differentiated egos less and less.

For Howe, the varied symbolic expressions or manifestations of the Self can actually get in the way of Self-Gnosis. These "symbols of unity," east and west, past and present, can be likened to Howe's point C, the child or offspring of the unification of the 'I' and 'Me'. Thus, the symbols of the Self appear when the interior self and the *emauton* come together. Furthermore, they also appear when the 'I' and the 'Me' stand in stark opposition within the same individual. The child, who has already been born, serves as a reminder of what can be. The child is an immature version of the Self and should not be mistaken for the Self; it is the Self's beginning, its place of origin. It is the center of the line ACB. One

²⁷ This is not the same as ego inflation, whereby the ego identifies with the experience. Rather, when wholeness is experienced, the ego is temporarily merged into the Self, it returns to the Undifferentiated Ground of Being. The cycle from differentiation to PRIMARY CONSCIOUSNESS may repeat itself many times over the course of a lifetime. However, with the completion of each cycle, the periods of gnosis are greater in both chronological time and intensity.

particular way of looking at Jung's assertion that the total personality cannot be known is to appreciate it as an admonition. It is akin to Yahweh's instruction in Genesis, "Of every tree of the garden thou mayest freely eat: But of the tree of the knowledge of good and evil, thou shalt not eat of it: for in the day that thou eatest thereof thou shalt surely die." Jung, by asserting that the total personality cannot be known, is protecting the majority of would-be aspirants from the dangers of ego inflation. Ego inflation can lead to insanity, which is a kind of psychological death. For Jung, in order for ego inflation to be prevented there has to be a clear distinction between it and the unconscious figures of the psyche (Jung, CW:9, pg. 23). Otherwise, as is also the case with Howe's thought, "pride goeth before the fall" (Jung, CW:9, pg. 24).

It is often the case that intense pride, as an unconscious manifestation of ego inflation, precedes the ego's permanent incorporation into the Self.²⁸ When point C is experienced it should not be grasped or tenaciously held. It needs to be given the space to develop into the experience of wholeness. Like a successful journey through the Tibetan Bardos, we must detach from the archetypal beings if we are to attain true liberation. Once we can detach from the archetypal beings, once we let go of the experience of point C, we simultaneously transcend the exoteric sense of Jung's admonition and Yahweh's instruction. If we eat from the tree of knowledge, yes, we shall surely die. Yet, the type of death that occurs is

²⁸ When this happens the individual is returned to a prepersonal state rather than experience transpersonal awareness.

the type that Jesus experienced on the Cross – an excruciatingly painful death that we have to suffer in a condition of utter abandonment. However, this death is not finality but a doorway to a new life, a new way of looking at things. This is the 6th Bardo whereby the “departed soul has its heaven and hell experiences, which balance karma in preparation for a new life.”

Howe’s Relationship to D.W. Winnicott

Throughout his life, D.W. Winnicott was primarily concerned with the psychoanalytic treatment of children and adolescents. He began studying medicine at Cambridge but stopped to serve on a British destroyer during World War I. He completed his medical studies in 1920 and 1923. It was also in 1923 that Winnicott entered into a personal analysis with James Strachey, Freud’s English translator. In 1927, the British Psychoanalytic Society accepted Winnicott for training. He qualified as an adult analyst in 1934 and a child analyst in 1935. In 1938, Sigmund Freud and his daughter, Anna Freud (a child psychoanalyst), moved to London as refugees from the Nazis in Austria. Twelve years prior, in 1926, Melanie Klein had moved to London. Klein and the Kleinians emphasized the importance of the first year of life. Infant mental health up to the first year was primary in determining the presence or absence of later psychopathology. In essence, said Klein, the personality or character structure is formed within the first year of life, depending on whether or not the infant’s relationship with his mother was conducive toward the development of the (infant’s) whole self. This view diverged from the orthodox Freudians. According to Freud’s psychosexual theory

of development, the personality is formed within the first four years of life, encompassing the oral, anal, and phallic stages respectively. Personality enters its final phase of crystallization when the Oedipus complex is either resolved or undecided.

Winnicott was more sympathetic with Klein's view than with Freud's. This, in large part, accounts for Burston considering him "crypto-revisionist" in his relationship to Freud. The divide between the orthodox Freudians and the Kleinians almost caused the collapse of the British Psychoanalytic Society. However, by the end of World War II in 1945, three discrete groups formed: The Freudians, the Kleinians, and a "middle" group to which Winnicott belonged.

Howe, like Winnicott, was sympathetic with many of Klein's theories, especially her understanding of phantasy. In terms of developmental theory, Howe agreed with Winnicott that the infant begins as undifferentiated. Winnicott (1986) wrote,

Deeper than this is a baby's experience, which at the beginning involves the woman because the infant has not yet separated out the mother, the environmental provision, the sensitive holding and handling and the feeding, from the self. The self has not yet been differentiated. Hence, absolute dependence (pg. 191).

The infant begins in undifferentiated one-ness with the mother. He has not yet formed a separate identity. Interestingly, Winnicott, like Howe, distinguished between shades of meaning employing all capital letters in a 1964 paper entitled *The Feminism*. He made the distinction between woman and WOMAN. For Winnicott, WOMAN is the "unacknowledged mother of the first stages of the life

of every man and woman” (Winnicott, 1986, pg. 192). It was in 1965 in *Cure or Heal?* where Howe first made use of capital letters to differentiate shades of meaning. More than likely, neither Howe nor Winnicott was the first to make use of this technique. Yet, based on my research, Howe was the first psychodynamic theorist to employ it routinely. Whether or not Winnicott was familiar with Howe’s work is uncertain. Yet, the simple fact that Winnicott made use of capital letters in his treatment of WOMAN suggests some conceptual similarity to Howe.

Winnicott’s WOMAN roughly corresponds to Howe’s undifferentiated one-ness. It does not refer to a particular woman but to the quality of the relationship between the primary caregiver, usually mother, and the infant. And for Winnicott, this quality is predicated upon the infant’s dependence upon the mother for his sense of self. Thus, we begin, in the first stages of life, as one with the mother. In Howe’s terminology, psychological development begins in undifferentiated one-ness and differentiates into a separate self. Hence, the self of the infant and the mother are separate. Once the self separates, according to Howe, further differentiation occurs and the self becomes an ‘I’ and a ‘Me,’ Howe’s hypothesis of two-ness. Neither one of these selves are inherently, to use Winnicott’s terms, false or true. Either self can become false if one self is identified with at the expense of the other. For Winnicott, by contrast, there are also two selves – the false self and the true self. The false self has been unconsciously created, as a kind of “front,” or persona, to “cope with the world,” this false front being designed to protect the true self” (Winnicott, 1986, pg. 33).

The true self, according to Winnicott, is not the same as the Self as exemplified by Howe (and Jung). The true self, often times, has been traumatized and is kept hidden by the false self.²⁹ Thus, the terms “false” and “true” are not pejorative but descriptive. They each describe their respective functions.³⁰ As with Howe’s understanding of the inferiority complex, a false self, is created to protect the true self that is experienced as vulnerable. Similarly, the false self in Winnicottian terms and the compensatory identification with superiority in Howe’s understanding of the inferiority complex are similar to Klein’s idea of a manic defense: “Where there is a depression but this depression is denied, by an unconscious process of course, so that the symptoms of depression appear as their opposites (up for down, light for heavy, white or luminous for dark, liveliness for deadness, excitement for indifference, and so on)” (Winnicott, 1986, pg. 33).

In *The Triumphant Spirit*, Howe talked about the healing aspects of depression. For Winnicott, depression is necessary for integration to occur. Depression, according to Winnicott, “is the price to pay for integration” (Winnicott, 1986, pg. 34). Likewise, in Kleinian thought, the depressive position is a necessary phase in the ontogenesis of the self. The infant enters the depressive position by introjecting both the “good” and “bad” aspects of the object. If this does not occur early in development we can become fixated at the paranoid-schizoid position and form a schizoid personality. For Howe, in the treatment of

²⁹ The false self protects the true self from the experience of pain that may be connected with the circumstances surrounding the original trauma.

³⁰ In Howe’s psychology, the unconscious identification with point A is compensatory in its relationship to point B. Something distressing occurred at point B to create the compensatory identification.

depression, we have to “accept” both the positive and negative aspects of the self in order for healing to occur. For Winnicott, it is the capability of being depressed that is important. This idea is based on the notion that depression is only possible when there is a self to be depressed. “It is evidence of personal integration” (Winnicott, 1986, pg. 34).

Winnicott’s “personal integration” is not the same as Howe’s idea of “wholeness.” While Howe would agree that there is a certain kind of wholeness in being integrated, wholeness, for him, refers specifically to the operation of the Self and not to either the ego or *emauton*. In 1964, Winnicott wrote a review of Jung’s autobiography, *Memories, Dreams, Reflections*. The review is decidedly one-sided in that it paints Jung in a somewhat negative light in terms of his relationship to Freud. At one point, Winnicott stated that Jung is a “recovered case of infantile psychosis” (Winnicott, 2000, pg. 483). At another place in his review, Winnicott asserted that, “whatever Freud was, he had a unit personality, with a place in him for his unconscious. Jung was different. It is not possible for a split personality to have an unconscious, because there is no place for it to be” (Winnicott, 2000, pg. 488). Thus, if Jung’s psychology is his personal confession, then it is ultimately reflective of a “split personality without an unconscious.” The basis for exploring Winnicott’s review is not to critique his analysis of Jung but to show Winnicott’s own struggle with Jung’s (and Howe’s) conception of the Self.

Michael Fordham, a Jungian analyst and one of the editors for the English translation of Jung’s *Collected Works*, alerted Winnicott to the fact that he was

using the words “Self” and “ego” interchangeably. Winnicott agreed that they were not synonymous, “since the Self is a word and ego is a term to be used for convenience with an agreed meaning” (Winnicott, 2000, pg. 490). Winnicott argued that the Jungian literature ignored much of the psychoanalytic writings on “maturation in terms of the evolution of the ego, including the concept of the tendency toward integration and toward a capacity for object-relating and for the psycho-somatic partnership” (Winnicott, 2000, pg. 490). Assuming that Winnicott’s critique is true, if, as is suggested, that Jungians as a whole neglect ego psychology, then what of Howe’s position? Howe’s “selves” psychology in *I and Me* certainly discusses the importance of the ego from a psychoanalytic perspective, but as with Jung, the ego is in a subordinate position to the Self. For Winnicott, the crypto-revisionists, and the orthodox psychoanalysts, the Self, as conceived by both Howe and Jung, is not given a place. Moreover, because of the ego’s subordinate position, Winnicott, in actuality, made an error in stating that the Jungian literature ignored the conventional psychoanalytic concept of the ego. Winnicott further stated that the mandala, as a symbol of the Self, “is a truly frightening thing for me because of its absolute failure to come to terms with destructiveness, and with chaos, disintegration, and the other madresses. It is an obsessional flight from disintegration” (Winnicott, 2000, pg. 490). Howe, and Jung for that matter, disagreed. When Tibetan monks finish creating one of their famous sand mandalas they will sweep it away to demonstrate the teaching of impermanence. Thus, rather than being an “obsessional flight from

disintegration,” the mandala, as a symbol of the Self, embraces it. Like Freud, Winnicott made the error in reducing the transpersonal to the pre-personal. Transpersonally, the absorption of the ego into the Self, in Howe’s thought, is not akin to madness. It is a moment that expands consciousness; it places the ego in direct relation to PRIMARY CONSCIOUSNESS (LOVE). If psychoanalysis were to entertain the possibility of a transpersonal SELF, then more than likely it would consider that psychotherapy is capable of much more than “personal integration” or “functional neurosis,” but also is conducive toward creating a psychological space, an alchemical chamber, where wholeness can occur.

Howe’s Relationship to R.D. Laing

As was indicated in the Introduction, Howe and Laing were friends from 1960 to 1965. Howe was one of Laing’s mentors in psychotherapy. Laing was often unorthodox in his therapeutic style as well as his interventions. In many respects, he deviated not only from conventional psychoanalytic practice but also from conventional psychotherapeutic practice. Laing’s unique style first became evident during his work as an army psychiatrist from 1951-1953. In order to build rapport with his psychotic patients, Laing would sit with them in their cells, usually without saying a word. He was curious to know how these patients would respond if given the chance to express themselves without restrictions or demands imposed by the therapist. By 1951, Laing was already immersed in the writings of Heidegger, Sartre, Buber, Nietzsche, Kierkegaard, and other Continental

Philosophers. Thus, it is likely that the aforementioned thinkers had a profound impact upon the way in which he related to the army inmates.

In 1956, Laing came to London to train as a psychoanalyst. During his analysis with the British psychoanalyst Charles Rycroft, Laing worked at the Tavistock Clinic. He completed *The Divided Self* in 1960, while working at the Tavistock Clinic, and he completed *Self and Others* in 1961, and in 1967 completed the *Politics of Experience*. *The Divided Self* and *Self and Others* are probably Laing's best works, while *The Politics of Experience* is his most popular. In all three works, Burston writes that, "Laing reproached Freud and his followers with aligning psychoanalysis to the natural sciences to insure a measure of respectability for his new discipline. In its place, he proposed a rigorous "science of persons," or an "interpersonal phenomenology" which, while allowing for the existence of "the unconscious," owed as much to Hegel, Kierkegaard, Dilthey, Husserl, Heidegger, Buber and, above all, Sartre, as it did to Freud and his followers." If Howe's psychotherapy could be labeled, there is perhaps no better description than "interpersonal phenomenology." One of the essential tenets of an interpersonal phenomenology, from Howe's perspective, would be to demonstrate that the unconscious is existential and psychoanalytic, rather than existential or psychoanalytic. This is not akin to the existential psychoanalysis put forth by Sartre in *Being and Nothingness*, to which Laing was greatly indebted. Instead, Howe's interpersonal phenomenological psychology demonstrates that the unconscious is "neither a thing nor a place. It is the state of mind which is unable

to relate the attention of the observer to the observed or experienced, by reason of the fact that either (1) there is no observer (2) there is no experience or (3) there is no object to be experienced” (Howe, 1965, pg. 224). Howe stripped away the jargon laden “theoretical” unconscious that often permeates the writings of the psychoanalysts and many of the existential-phenomenological psychologists/psychotherapists as well. It defines the unconscious in terms of its absolute bare essentials. In one way, shape, or form, the unconscious is simply the absence of relatedness between subject and object, self and other. For Howe, it was not necessary to construct a “new” unconscious, as based on the works of the Continental philosophers or some other theorist. Laing’s writings, in some places, are just as dense and technical as Freud’s, albeit with a different philosophical anthropology. Laing’s understanding of the unconscious was based in large part on his theory of “interpersonal defenses.” For both Howe and Laing, theories were used to support their patients’ shared experience. The unconscious for both Howe and Laing was a clinical fact that could not be ignored; thus, its existence was not dependent upon the postulations of any theorist, whether psychoanalytic, phenomenological, existential, etc.

To promote psychoanalysis, from both Laing’s and Howe’s point of view, the early orthodox psychoanalysts often used their patients as quasi-experiments to validate Freud’s doctrine. Furthermore, the best therapeutic interventions are often spontaneous manifestations predicated on the unique interpersonal situation that both therapist and patient found themselves in. (Thus, Laing’s willingness to

sit with the army inmates and his willingness to strip off his clothes and sit in a padded cell with a schizophrenic, while rocking back and forth, reflected his desire to absolutely abandon all conventional theories when it was called for. Laing was at his best as a psychotherapist. Many of his writings did little to exemplify his talents in this area.)

Due to the social and historical conditions in which both men found themselves, they each sought answers to problems posed in their respective psychotherapeutic practices outside psychoanalysis. (Psychoanalysis, as used in this sense, does not only refer to the orthodox, but to the loyal opposition and crypto-revisionists as well.) In terms of non-psychoanalysts, Laing, as was indicated earlier, was primarily influenced by the Continental Philosophers, as well as the work of Gregory Bateson and somewhat later, Michel Foucault. As for Howe, he was also influenced by the Continental Philosophers, and was heavily influenced by Krishnamurti, Buddhist Philosophy, Esoteric Philosophy, and Christian Mysticism. Nyanaponika Thera, meditation, and the various schools of Yoga influenced both Laing and Howe.³¹ According to John Heaton, Howe did not like Sartre, who was one Laing's most notable influences. It is probable that Howe rejected Sartre's materialism and pessimism, as well as his affiliation with communism. Moreover, as he did with Laing, Howe could not accept Sartre's drug use. While Howe did not accept Laing's drug use, and demanded his

³¹ Laing was an avid Yoga practitioner from 1963 and spent 1970 studying meditation with Nyanaponika Thera among others.

resignation from the Langham Clinic, there are more points of sympathy between Howe and Laing than there are points of contention.

Laing and Howe were both open to non-psychoanalytic approaches to psychotherapy and healing. However, Laing seemed more open than Howe to work with patients (and himself) in conventionally un-psychotherapeutic ways. Howe preferred to “stay in the consulting room” and utilize his insights garnered from existential-phenomenology and the wisdom traditions to deepen his practice of a psychodynamically-oriented psychotherapy. Laing was more inclined to move away from psychodynamic therapy altogether. The use of LSD and re-birthing therapies, for example, were viable alternatives for Laing, and hence, could be useful in the treatment of many psychopathologies.

The False-Self System

Laing first explicated his understanding of the false-self system in *The Divided Self*. Laing (1990) wrote,

The false-self system to be described here exists as the complement of an ‘inner’ self which is occupied in maintaining its identity and freedom by being transcendent, unembodied, and thus never to be grasped, pinpointed, trapped, possessed. Its aim is to be a pure subject, without any objective existence (pgs. 94-95).

Laing’s description of the false-self system sounds very similar to the Manichean goal of liberating the spirit from the confines of matter.³²

³² We cannot say that this is reflective of the Gnostic belief in general, as there are and were many forms of Gnosticism. In actuality, it is an extreme, lived dualism that existentially divorces mind and body, true self from false self. Gnosticism, both Christian and non-Christian. Rather, it is a specifically Manichean doctrine, as attributed to Mani (354-430), the Gnostic prophet of dualism. There is a Manichean creation myth that posits that Yahweh, as the offspring of the feminine Sophia, took what was originally pure spirit

According to Burston (2005),

“For Winnicott (Winnicott 1960), the distinction between the “true” and “false” self was more or less equivalent to the difference between an “authentic” and “inauthentic” self. For R.D. Laing, by contrast, the “True Self” is quite as ephemeral and inauthentic as the “false” self, though seldom experienced or interpreted as such by the patient (www.litencyc.com).

For Laing, the true self is not considered “authentic” while the false self is “inauthentic,” as it was for Winnicott.” Rather, as Burston asserted, there is a great deal of inauthenticity that characterizes both the true and false selves respectively. Perhaps the reason why the true self is considered to be more authentic than the false self is simply because of the very way in which it is experienced. Because the true self is often idealized, as with the schizoid patient, it is experienced as being more authentic than the false self. Yet, it is the distance between the false self and the true self that creates the pseudo-experience of authenticity and not the experience itself. Hence, we have to consider the very subject of the experience, or the *experiencer*. The experiencer is the “true self,” which is the subject who is looking out from behind the protective sheath that is the false self. Thus, the experience is filtered or interpreted by the false self before it gets experienced by the “true,” “wounded,” or “traumatized” self. In sum, the experiencer, or “true” self, is often experienced as being disincarnate and disconnected from others and from the world; moreover, that actions and/or

and trapped it in matter. Thus, Adam, the first man, was the primordial amalgamation of spirit and matter. The serpent, according to the myth, is not synonymous with “Satan,” “the tempter,” etc. Instead, the serpent is symbolic of the Christos who sought to free Adam’s spirit from the “carnal prison” that Yahweh constructed. Laing’s case of Peter exemplifies the Manichean doctrine in its most extreme form.

experiences function to deaden relatedness and create spaces for duplicitous interpersonal relationships.³³

Laing made the distinction between what he called the “mask” of the so-called “normal” person, the false “front” of the hysteric, and the false self of the schizoid. In the case of the “normal” person, Laing stated that, through his “mask,” many of his actions are “mechanical” (Laing, 1990, pg. 95). Importantly, with the “normal” person, he does not feel as if his mechanical actions are a result of some alien or foreign agent working “through” him, as if he were possessed by a supernatural entity. Even though many of his actions have a degree of falseness about them, they are not false in the sense that they are dissociated or disidentified from a “true” self. In the case of the hysteric, Laing stated that he “dissociates himself from much of what he does” (Laing, 1990, pg. 95). He acts in what Sartre would call “bad faith.” He acts and moves, but he, himself, is not in his actions and his movements. For instance, some adherents of Advaita Vedanta and Psychosynthesis distance themselves from pain, whether psychological, emotional, or physical, by disidentifying with the experience itself. In the case of melancholy, the feeling may arise and the individual or aspirant, without first accepting the experience, will immediately dissociate himself from by saying to himself, “I am not that which experiences the pain.” Many hysterics and schizoids, with a spiritual orientation, commit what John Welwood (2000) would call

³³ Burston (2005) writes “by contrast with the “True Self”, the term “authenticity” in Laing refers to any experience, expression or action that *enlivens* the patient, and brings their potential for honest self-expression and empathy with others into play.

“spiritual bypass.” They claim to be “detached” from the world. Detachment, for them, is a pseudo-spiritual practice in that it functions as a defense mechanism very similar to the role of superiority in the inferiority complex. Thus, it is not a means to become more attuned to the “divine spark,” or “supreme identity” within, but to psychologically distance themselves from pain and/or trauma, the intense feelings of inferiority that give rise to the compensatory process that leads to the identification. Spiritual practice becomes a vehicle for avoidance.

With the hysteric, the false self serves as a means for gratifying his desires. Thus, in the case of spiritual bypass, he may be seemingly detached from the affairs of the everyday world and claim to be only engaged in so-called spiritual affairs.³⁴ However, when he works, eats, drinks, sleeps, etc. he claims that he is somehow forced to do these things and that if he had his “choice,” he would not do them. Yet, unconsciously his “worldly” actions, as expressions of a false front, serve to gratify the self. He can “have his cake and eat it too.” He can pair seemingly contradictory practices and/or beliefs through spiritualizing his “everyday” actions, while simultaneously claiming that the matter is beyond his control. In reality, he finds himself immersed in the very things from which he claims to be detached. With the schizoid, according to Laing, the situation is different. What distinguishes the hysteric false front from the schizoid false self is

³⁴ This is similar to Howe’s understanding of the dynamics of phantasy. The hysteric escapes from the awkward situation by identifying with the phantasy.

that the hysteric's false front functions to satisfy the self whereas the schizoid finds no satisfaction in his actions. Laing (1990) wrote:

“The actions of the hysteric afford him ‘gains’ in the gratification of libidinal and/or aggressive wishes towards other persons, the significance of which he cannot acknowledge to himself...One sees that his state of affairs is very different from the split in the schizoid individual's being. His false self does not serve as a vehicle for the fulfillment or gratification of the self. In the schizoid individual, the self may remain hungry and starved in a most primitive sense while the false self may be apparently genitally adapted. The actions of the false self do not, however, ‘gratify’ the ‘inner self’” (pg. 96).

It is important to note that Laing gave an existential-phenomenological account of schizoid persons. He described these persons within the horizon of their own being. From both Howe's and Laing's perspective, in order for the psychologist to comprehend what is meant by a schizoid's unique phraseology and behavior, he must first understand the schizoid's existential context. When Laing classified a particular person as “schizoid” he used these classifications in reference to the person's existential and phenomenological horizon, and not as clinical diagnosis (Laing, 1990, p.17).³⁵ Furthermore, it is important to understand that the current metapsychological and applied behavioral models fail to take into account this human dimension in which the schizoid operates. Laing's existential-phenomenological psychology and Howe's psychology reintegrated what the more conventional models have disintegrated. The patient that both Howe and Laing encountered was understood as a person rather than as a thing. When the

³⁵ Howe used psychoanalytic and psychiatric terminology in a similar fashion. He provided psychoanalytically based phenomenological descriptions of his patients' journeys toward wholeness.

psychotherapist treats his client as a person, as opposed to an organism, he reconstructs the patient's way of being himself in his world, and in the therapeutic relationship, focuses on the client's being-with (See Laing, 1990, p.25). Therefore, the task of Laing's existential-phenomenological analysis and Howe's psychology of the selves was to disclose the client's unique being-in-the-world.

How are we to understand the schizoid's being-in-the-world? The categories that the medical models use to assess clients threaten to further objectify their existence. Laing cites Kraepelin's description of "catatonic excitement:

"The patient I will show you today has almost to be carried into the rooms, as he walks in a straddling fashion on the outside of his feet. On coming in, he throws off his slippers, sings a hymn loudly, and then cries twice (in English), 'My father, my real father!' He is eighteen years old, and a pupil of the Oberrealschule (higher-grade modern-side school), tall and rather strongly built, but with a pale complexion, on which there is very often a transient flush. The patient sits with his eyes shut, and pays no attention to his surroundings. He does not look up even when he is spoken to, but he answers beginning in a low voice, and gradually screaming louder and louder. When asked where he is, he says, 'You want to know that too? I tell you who is being measured and is measured and shall be measured. I know all that, and could tell you, but I do not want to.' When asked his name, he screams, 'What is your name? What does he shut? He shuts his eyes. What does he hear? He does not understand; he understands not. How? Who? Where? When? What does he mean? When I tell him to look he does not look properly. You there, just look! What is it? What is the matter? Attend; he attends not. I say, what is it, then? Why do you give me no answer? Are you getting impudent again? How can you be so impudent? I'm coming! I'll show you! You don't whore for me. You mustn't be smart either; you're impudent, lousy fellow, such an impudent, lousy fellow I've never met with. Is he beginning again? You understand nothing at all, nothing at all; nothing at all does he understand. If you follow now, he won't follow, will not follow. Are you getting still more impudent? Are you getting impudent still more? How they attend, they do

attend, and so on. At the end, he scolds in quite inarticulate sounds (Laing, 1990, pp.29-30).

Laing (1990) goes on to state that “Kraeplin notes here among other things the patient’s ‘inaccessibility’: ‘Although he undoubtedly understood all the questions, he has not given us a single piece of useful information. His talk was...only a series of disconnected sentences having no relation whatever to the general situation’” (pg. 30). This boy is merely responding to the feeling of being objectified by Kraeplin and his students. According to Laing, Kraeplin’s diagnosis functions to exacerbate the client’s already depersonalized timbre. Instead, from Howe’s perspective, we must encounter him as a unique person who has developed a radically detached way of being for himself in contradistinction to his being for others. As Laing asserted:

Comprehension as an effort to reach and grasp him, while remaining within our own world and judging him by our own categories whereby he inevitably falls short, is not what the schizophrenic either wants or requires. We have to recognize all the time his distinctiveness and differentness, his separateness and loneliness and despair (Laing, 1990 ,p.38).

We must disclose the existential truth by which the schizoid and/or schizophrenic lives or dies. This truth may or may not correspond to what we understand as real. Nevertheless, we must fully acknowledge his existential position in order to favorably uncover his being.

In *The Divided Self*, Laing wrote about the case of Peter, as illustrative of the schizoid false self-system:

Peter was a large man of twenty-five, and he looked very healthy...He came to me complaining that there was a particular musty smell emanating from

his body...He felt that it came from his genital region...He compared the smell to the slum housing district where he grew up...Peter felt that neither his mother or his father had wanted him...Moreover, he felt they resented him...His mother begrudged him for ruining her figure in being born...His father simply begrudged him for existing at all...Furthermore, his mother always told him, when she caught him playing with his penis, that it would not grow if he did that...However, he didn't begin masturbating until fourteen...The only early memories he told me to begin with were of these sexual incidents...In secondary school, he began to have a growing sense that he was being put by everyone in a false position...He felt that he had to spend all his energy being a credit to his parents, his uncle, and his teacher...However, he felt that he was a nobody, all his attempts to be somebody were a pretense...Once his teacher asked him to read from the Bible to his fellow classmates...He read it so well that everyone commented on the excellence of his "performance" ...To Peter this was a mere demonstration of his fine "acting" skills...Peter always felt himself to be a hypocrite and a sham...The more Peter tried to hide his "real" feelings the more he would attempt to figure out if other people could detect his true self...At the office, he used to have sexual fantasies about his female colleagues and then go into the bathroom and masturbate...At times, after he had finished, he would encounter the very woman he had just raped in his mind...He felt that this woman could look through him, and detect what he was secretly doing to her...From this point, Peter felt it increasingly difficult to hide his true self...Peter retained a sense of normalcy...However, this normalcy was the consequence of a deliberate intensification of his "inner" "true" self and "outer" "false" self. (Laing, 1990, pp.120-125).

From Howe's perspective, when Peter became detached from the core of his authentic self, the 'I', he defensively identified with a false self, the 'Me.' His ability to carry on an apparently normal persona reflected the existential distance between the 'I' and 'Me,' self and the world. Peter developed a form of ontological/existential duality by constantly trying to comply with the demands that others had placed on him. This resulted in Peter hating both himself for not meeting the demands and hating others for imposing a losing situation on him.

However, when Peter's 'I' began to fuse with his 'Me' he felt as though other people could penetrate this persona and decipher his true intentions.³⁶

If Peter's actions were to belong to any self they belonged to what Howe would call the outer self, which became autonomous in both function and operation. The 'Me' became further dissociated from the 'I', making it nearly impossible for personal integration to occur. Peter could function without anxiety only when he was identifying with point B, the emauton. He most often played a role in the midst of people whom he felt had the power to penetrate him. According to Laing, by disguising himself he severed the relationship between his true self and his repudiated false self (Laing, 1990, pg. 127). His dissociation from one half of his psyche excludes him from real participation in the world. Therefore, from Laing's perspective, he was precluded from having a direct relationship with real things and real people (Laing, 1990, p.82).

Afterthoughts on the Schizoid Condition

The aforementioned hypothetical analysis would be based on Howe's *I and Me*, which was published in 1935. In 1965, Howe published his own views on the schizoid condition. Howe (1965) wrote,

The schizoid trend is a motivated tendency toward an essential inward indivisibility or unbornness, contrary in direction to life's normal outward flow. It is a regressive identification with inward older sources of energy, producing a negative attitude toward, and withdrawal from, a normal life of personal and other object relationships (pg. 192).

³⁶ The 'I' and the 'Me' temporarily became undifferentiated leading Peter to believe that he was transparent.

For Howe, life naturally flows outward. This idea is somewhat similar to Wilhelm Reich's notion that, in non-pathological conditions, whether psychological, emotional, or physical, orgone energy moves toward the other, it moves from the self to the world. In pathological conditions, for Reich, the direction of energy is reversed – orgone energy moves from the world to the self, and the organism thus contracts or withdraws from life. The schizoid is “determined to live in one world only, without an ‘other’.” Howe (1965) stated that the difference between the hysteric self and the schizoid self is that the hysteric unselfishly denies the self, except as the ‘other’ with which it was identified. He only acknowledges his own self as other; he can only be himself when identified with the other. The schizoid, on the other hand, does not deny the self. Rather, he denies limitation rather than denying the self.

Howe (1965) stated that there are several characteristics of the schizoid condition:

withdrawal into a state of intellectual abstraction and mental phantasy, with ego-inflation; absence of sustained affection, extreme emotional instability varying from apathy to violence: absence of experience of any kind, or ‘feeling of unreality’; depersonalization, experience of ‘not being here’, of non-existence; and finally, but perhaps not so easily recognized, the withdrawn and still omnipotently inaccessible ‘I’, which is absolutely and often incredibly truthful in its capacity for criticism and judgment, but utterly incapable of the saving grace of bending to insincerity, as most of us obligingly do in order to adapt ourselves more easily to the requirements of this world (pg. 198).

Laing (1990) also recognized that the schizoid attempts to be omnipotent. He wrote, “by enclosing with his own being, without recourse to a creative

relationship with others, modes of relationship that require the effective presence to him of other people and of the outer world” (pg. 75). Howe stated that the schizoid condition is often easily confused for the hysteric condition. For Howe, the split that occurs in both conditions happens on a different level:

The split in the schizoid state occurs between inner and outer world, between ‘I’ and ‘Me,’ between spirit and matter...The split in the hysteric state is on the level of emotion, i.e., it is between ‘heart’ and ‘head’, or ego and shadow, or between the aspect of the self with which we are identified and that from which we are dissociated (1965, pg. 198).

In terms of psychotherapeutic treatment, Howe believed that treatment for the two conditions would be as different as the conditions themselves. As is usual with Howe’s practice of psychotherapy, he allowed the patient’s unique, individual condition to determine the best course of treatment; for it is the relationship that is vital and not the therapist’s theoretical position. Howe abandoned adherence to specific theories or any allegiance to party lines for the sake of his patient. Howe felt that psychoanalysis was best suited for treating the hysteric, which “aims at setting apart what has become joined together and joining together what has been set apart” (1965, pg. 199). Howe recommended the practice of analytic detachment, which is often characteristic of orthodox psychoanalysis, because the less involved the analyst is, the better able he is to facilitate the process of analysis and synthesis, whichever is required by the situation. For the schizoid,

“above all is to be met, personally; not to be analyzed, or even treated, but to be lived with in spite of his particular refusal to permit just that. The patient’s refusal to suffer therefore transfers to his therapist the need to suffer him personally, to allow him to regress completely, to be as violent

as he feels sometimes, and to meet him at all times on all levels (Howe, 1965, pg. 200).

Psychoanalysis, from Howe's perspective, would only push the schizoid further into his withdrawal. It would further fragment an already great split between the 'I' and the 'Me,' between "internal" reality and "external" reality. By meeting the schizoid where he is, and not where the therapist is, psychotherapy helps bridge the gap between the 'I' and the 'Me,' "internal" and "external reality." The omnipotent self that served as the initial impetus for such dissociation is brought into awareness by virtue of the meeting that takes place between therapist and patient. The schizoid would be permitted to regress, so as to take the therapist with him to the very source of the conflict. By permitting the schizoid to regress he does not have to withdraw. The therapist becomes witness to the schizoid's family dynamics, he does not simply "observe" them from a position of detachment. Such detachment is dangerous, from Howe's point of view, because the therapist himself is splitting in a similar manner as the schizoid.³⁷ What the schizoid needs most is for the therapist to encounter him, to experience him, to live with him, and not examine him. He is the very opposite to Peter's mother. He accepts Peter's true self, the self that he so desperately had to hide from his mother, and the self that he sought to hide from the world.

³⁷ Interestingly, Howe felt that most psychotherapists are schizoid, which is often advantageous with many psychopathologies.

Concluding Remarks

For Howe we are the two-ness of female and male, point A and point B, spirit and matter. This “and” is an important element in Howe’s psychology of the selves. Basically, it points to the fact that our essential identity is one and not two. As human beings, ultimately we are the meeting of opposites. We must always look at both sides, consulting them, bringing them together so that a well-balanced relationship to life is sustained in response to the demands that reality places upon us.

According to Howe, to be well balanced “is to be balanced internally, within the limits of an inclusive negative, self-contained, A within B, both sides accepted and neither raised above the other” (Howe, 1935, pg. 249). A is not subordinate to B and B is not subordinate to A. Both exist on the same parallel line, equidistant from the fulcrum, point C. For Howe, we accept both the self and the not-self, the ‘I’ and the ‘not I’, the ‘me’ and the ‘not me.’ Howe stated that between the left pillar (A) and the right pillar (B) lies the middle pillar (C). This middle pillar has already been considered to be the child of the marriage between points A and B. Howe went on to say that the child of the ‘I’ and the ‘Me’ is also the “Seat of Judgment” (Howe, 1935, pg. 248). Although Howe does not reference the Kabbalah in *I and Me*, he is using a Kabbalistic metaphor.

According to the Kabbalah, “judgment” (*Gevurah*) refers to the fifth sefira on the Tree of Life. *Gevurah* also suggests “strength.” Yet, according to the Kabbalah, the “Seat of Judgment,” or *Gevurah*, does not lie on the middle pillar, but on the

left pillar. In Kabbalistic theory, it is true that the middle pillar balances sefirot on the left and right pillars of the Tree of Life. Yet, it is the sixth sefira, Tipareth (Beauty, Harmony, Unity, Perfection) that interconnects all the sefirot. Thus, it is from the “Seat of Harmony” and not the “Seat of Judgment” that we look upon points A and B and begin the process of cultivating balance between the two opposites. From the middle pillar, said Howe, we enter a first stage where we analyze the two points, looking them over, noting their differences. Based on analysis, the conclusion is that A is not B and B is not A. “From the act of analysis is born the moving child of any consequence” (Howe, 1935, pg. 249). Once analysis is exhausted, when it cannot go any further, we begin to see, according to Howe, *continuity* between A and B. This marks the second stage toward the development of wholeness. Howe (1935) wrote, “These apparent antitheses, which seemed at first sight to be so unfriendly, as black and white, male and female, life and death, are not only opposites; they are also continuous, manifesting their differences as related parts of the wholeness of our experience” (1935, pg. 249). Howe stated that beyond the recognition of continuity, there is also a third and final stage. It is best to let Howe (1935) speak for himself, as he poetically summed up the final stage of the journey,

There is yet a final stage of understanding which comes as the resultant unity of an accepted dualism: we find that these two antitheses, about which so much fuss has been made in separating the antagonists, are not really so different after all. The seeming difference is but an illusion, for A and B are the same, *being only images of each other inverted as in a mirror*. This is the final unity of all understanding, and the peace that passes on beyond: but it is essential first to discriminate their difference, or we cannot

make that final step of wisdom which recognizes their identity (pgs. 249-250).

PART III

The Central Themes of Howe's Psychology

CHAPTER 7

Howe's Psychology and Philosophy of Relationship

“If you observe yourself in relationship with others, do you not find that relationship is a process of self-revelation? Does not my contact with you reveal my own state of being if I am aware, if I am alert enough to be conscious of my own reaction in relationship? Relationship is really a process of self-revelation, which is a process of self-knowledge; in that revelation there are many unpleasant things, disquieting, uncomfortable thoughts, activities. Since I do not like what I discover, I run away from relationship which is not pleasant to a relationship which is pleasant.”

~ Krishnamurti (1996)

We assume so much as being obvious that we never enquire as to what it really means. These unconscious assumptions apply particularly in the most common experiences of life. ‘Of course I know what a relationship means!’ would be everybody’s ordinary attempt to brush off the inner implications of what a relationship really and exactly is now, as it is affecting us, e.g., as husband and wife, as father and daughter, as lover and beloved, or employer and employee. ‘Of course I know what a relationship is!’ may tell us more of what it ought to be or what I would like it to be, than of what it is. Indeed, because of, or in spite of our assumptions, we might know nothing of what it really is (1965, pg. 68).

~ E. Graham Howe

Howe's Psychology and Philosophy of Relationship

In *Cure or Heal?* one of the questions that Howe attempted to answer was, “What is Relationship?” Needless to say, Howe’s reflections on the nature of relationship did not merely recapitulate the orthodox Freudian view. Rather, Howe stripped away the technical jargon that obfuscated the essential meaning behind Freud’s theoretical edifice.

For Howe, psychoanalysis was first and foremost a psychology of relationship. Indeed, his own understanding of relationship was inspired by Freud’s

differentiation between the manifest and latent content of a dream: “As Freud was the first to discover in regard to dreams, the manifest content tells us little of the latent content, or real meaning, of the dream. So it is with relationships” (Howe, 1965, pg. 68). Relationships have both a manifest and latent content, an overt and covert meaning. As is often times the case, we think we have a grasp on the latent content of a particular relationship by paying close attention to its manifestation. Schism can occur, in that the manifest and latent content of a relationship can have radically different meanings to different people. Often times, interpersonal relationships end much to the surprise of one of the involved parties, who assumes, “Things were going so well, how did this happen?” Howe’s response to the question, “What is Relationship?” was his own and not Freud’s. Howe, combined Freud with Krishnamurti in an attempt to create a psychology and philosophy of relationship that combined psychoanalytic insight with choiceless awareness.

For Howe, the fundamental characteristic of all relationship is that it involves two or more parties positioning themselves as opposites. Howe (1965) wrote, “We are all to some degree opposed to one another, which is what makes us tick. To live is therefore not to *love* one another, but to recognize, admit and accept one another, each as we are *now*” (pg. 70). For Howe, the experience of relationship changes radically when we invoke the word, “now.” Howe (1965) wrote:

Our experience is changing all the time; however small this change may be, it requires our constant attention, because even the smallest change may sometimes prove to be the greatest importance. Therefore the communication which is involved in an experience of relationship requires to be most subtly exchanged on all levels (pg. 70).

The “now” is a fleeting moment that cannot in practice be fully attended to. It is enough to be aware of the transient nature of the “now,” noting how its subtle fluctuations and nuances have the potential to exert a powerful impact.

As was stated, according to Howe, relationship is primarily the experience of polarity. Specifically, it is the experience of polarity between self and other (Howe, 1965, pg. 72). Alan Watts, in *The Wisdom of Insecurity* (1968), discussed how in-groups and out-groups are formed based on the principle of self versus other, me versus not-me. Howe stated, “I am over here. You are over there. But what is between us?” (Howe, 1965, pg. 72). For Howe, it is the between in any relationship that is most important. This “between” is often mysterious. It cannot be accurately described, labeled, or pinned down. All attempts to define what it is miss the mark. For Howe, it is a “non-conceptual” experience (Howe, 1965, pg. 72). Non-conceptual, in this instance, is not the same as “unconscious.” For Howe, we can have a conscious experience that transcends conceptual boundaries. Following from the writings and teachings of the great sages, both east and west, we can be aware of awareness, which is non-conceptual.

Howe asserted that there is a medium that flows between us and that this medium can be likened to “water” (Howe, 1965, pg. 72). Since the between in any relationship, according to Howe, always has a flowing quality, water is the most suitable symbol to describe its mode of operation. From a Jungian perspective, it is ‘archetypal water’ (Howe, 1965, pg. 72). This water can be drunk, bathed in,

baptized in, swam in, drowned in. It can be used for cleansing, healing, and serve as a vehicle for new life. It is the between of any two persons that permits for the flow of life to move back and forth, to and from, without attempting to close the gap between the two. Howe (1965) wrote,

To close this vital gap, for the sake of comfort or security, is to find neither life nor death, but only depression and inertia. Apartness, from the object of desire is the means of our life and renewal, and satisfaction is most salutary when soonest dissatisfied. The heart of life is the wound of Amfortas, in the story of Parsifal. It is at its strongest when broken, provided that it claims no need for being mended (pg. 73).

Howe turned conventional wisdom on its head. The way to life, the way to strength, and the way to healing is ultimately through the intense experience of paradox. We are strongest when broken. The wound of Amfortas is as the broken, crucified Jesus. Despite the temptations to “save himself” and avoid the Cross-, Jesus remained, hanging, suffocating, and in intense agony. Through the “stripes” of Jesus healing occurs. This is not simply a theological statement that functions as a guarantor for salvation, but a psychological reality. The psychotherapist or psychiatrist who attempts to mend his patient’s “broken heart” is actually, from Howe’s perspective, doing a great disservice. Paradoxically, his heart must remain unmended. By attempting to put the two halves together, the well-intentioned psychotherapist is weakening rather than strengthening his patient. From the manifest content, the person may appear fine, being equipped with powerful doses of an anti-depressant and the latest technique to suppress his pain.

Looking at the latent content, however, reveals that the waters have temporarily stopped flowing.

Communication is integral to our understanding of relationship. For Howe, communication is not only an act of talking, writing or signaling, to another person. It should also be an experience of relationship (Howe, 1965, pg. 80). We experience relationship through communication. Howe stated that, rather than share the experience of communication with another, we often carry on private conversations in which the other functions as a mirror for ourselves. We see the other as our reflection and talk to other as if we are talking to ourselves. Thus, the other is not truly other, as he is not encountered as such. Nor, is he a split off and projected part of the self. He is the other perceived as the self. This forms the basis for what Howe called “egoic man.” For true communication to be possible, egoic man must surrender. From an orthodox Freudian perspective, an undefended person risks psychosis, in the sense that the ego cannot defend itself. Moreover, the difference between neurosis and psychosis is related to the degree to which the mechanisms of defense function to protect the ego from being engulfed by the unconscious. Howe did not advocate that we become defenseless, in the sense of being continually open to internal (psychological) and external attack. Rather, he advocated that we simply be present to the other without imposing any demands on him or her, which, in actuality, requires an ego that is both well bounded and structurally sound. Howe (1965) wrote,

This requires a self-diminishing toward the point of self-emptying, a letting go of the egoic self, undefended, in a state of self-surrender, which is called ‘paying attention to the other (pg. 81).

The act of being present to the other, coupled with the act of withdrawing any personal demands for the other to meet, forms the basis for what Howe believed to be the foundation for the practice of psychotherapy. While this principle is frequently endorsed as the basis for any effective psychotherapy, whether from a psychoanalytic, behaviorist, humanistic, or cognitive perspective, Howe was possibly the first to articulate it clearly. Over and over again, Howe returned to beginnings, not due to simplicity or naiveté, but because what is most basic, what is most essential, is often passed over in practice. Psychotherapy for Howe, as it was for Erich Fromm, is the “art of listening.” Howe’s psychotherapy, as the art of listening, the hallmark for true communication, and as the foundation for the experience of relationship, is not restricted to the theoretical confines of the therapeutic consulting room. As mentioned earlier, it is a way of life to be applied and practiced in all situations, regardless of the contextual horizon in which the involved parties may find themselves.

Violence and Relationship

According to Howe, violence attests to the radical disruption of communication; it is the absence of relationship. It erupts “when the bridge of communication has been broken” (Howe, 1965, pg. 85). For Howe, the “heart” is the bridge that permits for the flow of life between two opposites or contradictory poles. Thus, when it is broken, it speaks in such a way so as to call for immediate

attention. It becomes demanding and tyrannical. It is the very opposite of self-surrender; it is a monstrous version of egoic man, and expresses itself through the medium of destruction. The only effective means to treat the violent person was through non-violence, which places violence in relation to its opposite. Vitally, according to Howe, “we need to discover the meaning of the communication which we have received: i.e. what violence means in this particular case” (Howe, 1965, pg. 85).

At this point, the question of violence must be addressed both existentially and hermeneutically. Violence, for Howe, was both a psychological and sociological phenomenon. The restoration of relationship, the cessation of violence through placing it in relation to non-violence, by confronting it with its own extreme, involves the careful attention to the psychological dynamics and contextual factors that give rise to its manifestation. Thus, its latent meaning must be cognized by the psychotherapist if he is to initiate the healing process. According to Howe, we have to ponder questions that will lead to its probable beginnings: “What bridges have been broken, by whom and when, and can they be mended, so that communication can be restored?” (Howe, 1965, pg. 85). Also, it is important to ask whether any bridge *was present to begin with*. It is horrifying to suggest that some individuals begin their psychological and emotional lives without a (figurative) heart. This “heartless” person, from Howe’s perspective, was deprived of the necessary love that would permit for its formation and subsequent development as a crystallized heart. From Heinz Kohut’s perspective,

he did not receive the mirroring that would enable the internalization of an ego that is fundamentally loveable. As an infant, the look that was returned to him, the very look that formed the foundation for his sense of self, the look that became his identity, suggested, not violence, scorn, or even rejection, but much worse than any combination of the aforementioned, namely indifference.

Whether “the bridge” was absent from the beginning or whether it was broken subsequently, the violent person needs both time and patience (Howe, 1965, pg. 85). Since the violent person experiences himself as someone who is not worthy of respect, said Howe, he must be respected as a person. Through an act of self-surrender, the therapist attends to the meaning of the violence as it is being manifested, presents the meaning for the other to see, and then mirrors to the other the absent or broken heart that is missing in the eruption of violence. Thus, what takes place is a genuine meeting, an encounter between persons, a (healing) relationship that leads to the very transfiguration of violence itself.

Schizophrenia and Relationship

Like violence, schizophrenia, according to Howe, signifies an absence of relationship. Howe (1965) wrote,

The schizophrenic is incapable of, and therefore withdrawn from relationship, he points to and reinforces the importance of what he has not got and cannot do. Above all, the schizophrenic tells us what relationship means, simply because, having been denied it, he is incapable of experiencing it (pg. 86).

Howe called into question biological and/or genetic explanations that reduce the schizophrenic to a peculiar psycho-physiological make up or bundle of

neuropathologies. This is not to say that Howe dismissed such explanations entirely. But, he made the point that the physiological, neurological, and chemical anomalies that characterize a schizophrenic's brain, may be an effect of prolonged un-relatedness, rather than the cause of it. Howe (1965) wrote,

But surely, if schizophrenia is a condition of un-relatedness, it is to be expected that changes are just as likely to ensue on a physical level, which depends just as much upon relatedness and polarity, as do those levels which are responsible for our psychological and emotional behaviour. In sum, therefore, we may suspect that these physical changes are an effect rather than a cause of the disease (pg. 87).

It is likely, said Howe that schizophrenia is the result of a social system that is itself disconnected, disordered, and unrelated. Thus, according to Howe, the society in which the schizophrenic lives is fragmented, split, and dissociated.

Like Laing, it could be said of Howe that he “romanticized” schizophrenia when he asserted, “Perhaps it may only be the best of us who have the courage and integrity to become schizophrenics” (Howe, 1965, pg. 87). The “courage” that it takes to be a schizophrenic suggests that he (the schizophrenic) is more honest in his experiential response to society. Mainstream society, including the institution of the family, is somewhat schizogenic. Howe (1965) wrote, “The experience of no-meeting but much talking, of over-stimulation without attention, of loving without allowing for ‘being,’ is what has become known as the typical shizogenic family background” (pg. 87). According to Howe, in a schizogenic family, we are continually bombarded with double-bound messages. We are told to be things that we cannot; we are asked to attain goals that are unattainable; we are

commanded to respond to hate with love; we are told to succeed when failure is the only option. Perhaps the only way to survive, and be honored with the title of “sanity,” is to conform. From Howe’s perspective, the schizophrenic may simply be suffering the consequences for his resistance to conform. Maybe, unlike most of us, he is unwilling to pretend that he has solved the riddle of the double bind.

When Howe and Laing met in 1960, Laing was reading the work of Gregory Bateson. Furthermore, Laing adapted Bateson’s theory in *Sanity, Madness, and the Family* (1964). In *Steps Toward an Ecology of Mind* (2000), Bateson put forward his theory of schizophrenia. According to Bateson (2000), “it is hypothesized that a person caught in a double bind may develop schizophrenic symptoms” (pg. 201). For Bateson, a “double bind” constitutes a situation in which no matter what a person does, he can’t win (2000, pg. 201). Bateson asserted that certain “necessary ingredients” have to occur in order for a double bind situation to develop. There are as follows:

- “1. *Two or more persons*. Of these, we designate one, for purposes of our definition, as the “victim.” We do not assume that the double bind is inflicted by the mother alone, but that it may be done either by mother alone or by some combination of mother, father, and/or siblings.
2. *Repeated experience*. We assume that the double bind is a recurrent theme in the experience of the victim. Our hypothesis does not invoke a single traumatic experience, but such repeated experience that the double bind structure comes to be an habitual expectation.
3. *A primary negative injunction*. This may have either of two forms: a) “Do not do so, or I will punish you,” or b) “If you do not do so and so, I will punish you.” Here we select a context of learning based on avoidance of punishment rather than a context of reward seeking.
4. *A secondary injunction, conflicting with the first at a more abstract level, and like the first enforced by punishments or signals which threaten survival...* The secondary injunction is commonly communicated to the

child by nonverbal means. Also, the secondary injunction may impinge upon any element of the primary prohibition.

5. *A tertiary negative injunction prohibiting the victim from escaping from the field.* Escape from the field is made impossible by certain devices which are not purely negative, e.g., capricious promises of love, and the like.

6. *Finally, the complete set of ingredients is no longer necessary when the victim has learned to perceive his universe in double bind patterns*" (2000, pgs. 206-207).

Bateson (2000) also indicates that there are several effects of the double bind:

"1) When the individual is involved in an intense relationship; that is, a relationship in which he feels it is vitally important that he discriminate accurately what sort of message is being communicated so that he may respond appropriately.

2) And, the individual is caught in a situation in which the other person in the relationship is expressing two orders of message and one of these denies the other.

3) And, the individual is unable to comment on the messages being expressed to correct his discrimination of what order of message to respond to, i.e., he cannot make a metacommunicative statement" (pg. 208).

Bateson (2000) goes on to describe how a schizophrenic may behave, think, feel, and perceive:

1) "The schizophrenic feels so terribly on the spot at all times that he habitually responds with a defensive insistence on the literal level when it is quite inappropriate, e.g., when someone is joking" (pg. 207)."

2) "Schizophrenics also confuse the literal and metaphoric in their own utterance when they feel themselves caught in a double bind" (pg. 208).

3) "The schizophrenic may assume that behind every statement there is a concealed meaning which is detrimental to his welfare. He will be continually searching for meanings behind what people say and behind chance occurrences in the environment, and he will be characteristically suspicious and defiant" (pg. 209).

Most mainstream approaches to schizophrenia discount Bateson's theory, and by virtue of discounting Bateson's theory, would discount Howe's and Laing's as

well. Yet, Bateson's theory is still relevant today and it has not been invalidated by scientific research.

In the early 1960's, at the time when Howe wrote *Cure or Heal?* the treatment options available to the schizophrenic were limited. In many respects they have not changed much since Howe's day. The doctor-patient relationship, according to Howe, was vertical. Thus, the doctor is placed in the position of superiority and the patient in the position of inferiority. Superiority and inferiority, in this instance, do not refer to complexes, or to the dynamics associated with complexes. Rather, they refer to the "up" position that the doctor was in and the "down" position that the patient, especially the schizophrenic, was in.³⁸ The doctor "knows" more than the schizophrenic does. Thus, his "up" position gives him the power to "explain" to the schizophrenic what is "going on" with him. Moreover, he can, if he so chooses, write articles and books about "catatonia" and "paranoia."

The medical orthodoxy during the early 1960's to which Howe spoke consisted of 1) examination, 2) diagnosis, and 3) the appropriate treatment to stop the disorder or diseased condition (Howe, 1965, pg. 89). For Howe and the anti-psychiatry movement of the 1950's and 1960's, the aforementioned medical orthodoxy was called into question. Instead of a vertical relationship between the doctor and the patient, Howe and Laing, advocated a more horizontal relationship.

³⁸ The schizophrenic was not just an ordinary patient. He was extraordinary. His "language" was different than most, his gestures were peculiar, and he could not "communicate" his problems.

According to Howe, a horizontal doctor-patient relationship is based on unprejudiced enquiry. This involves overturning the assumption that the doctor “knows” and the patient is “ignorant.” The patient, said Howe, is to be encountered in his own world. Moreover, the doctor must learn to speak his patient’s language, whatever that language may be. For instance, this does not mean that with the schizophrenic Howe spoke word salad. Rather, he *accepted* the schizophrenic for who he was.³⁹ This involved accepting the whole person, not just one aspect over the other. By so doing, Howe was able to treat the a-polarity, which is one of the essential characteristics of schizophrenia.⁴⁰

Secondly, said Howe, diagnosis needs to be carefully avoided, both in the mind of the doctor and of the patient” (Howe, 1965, pg. 89). This view of Howe’s was one of his most radical. This marked a shift from the Howe of the 1930’s *Lancet* articles to the Howe of the 1960’s *Cure or Heal?* Howe admitted that the doctor knows that his patient is schizophrenic.⁴¹ Instead, said Howe, the doctor “knows that knowing this does not matter. It is merely a necessary handicap, to be made light of, particularly in the mind of the patient” (Howe, 1965, pg. 89). Diagnosis, from Howe’s point of view, tells us more about the theory behind the diagnosis than it does the patient. There is a difference between “schizophrenia”

³⁹ Howe’s practice of acceptance was one of the most important tenets of his psychology and psychotherapy.

⁴⁰ For Howe, a-polarity was another way of saying un-relatedness. Yet, it more fundamentally describes the psychological space to which the schizophrenic is confined; he is confined to a very limited aspect of existence by his inability to embrace his own totality, which would include the acceptance of the internalized aspects of society that have since been rejected.

⁴¹ Thus, it is not as if equality in terms of the doctor-patient relationship is synonymous with feigned ignorance on the part of the doctor.

as a diagnosis and “schizophrenia” as a withdrawal or absence of relationship. The diagnosis of schizophrenia, as indicated in the DSM, does not highlight a-polarity. Instead, it is a compendium of “symptoms” that forms part of an orthodox medical classification system.

Finally, Howe stated that the “appropriate treatment of schizophrenia is meeting” (Howe, 1965, pg. 89). The best way to illustrate Howe’s idea of “meeting” the schizophrenic is to return to the example of R.D. Laing in one of his most memorable moments with a schizophrenic. The following account is paraphrased from John Clay’s, *R.D. Laing – A Divided Self* (1996). While in Chicago, Laing was invited by some doctors to examine a girl who had been diagnosed with schizophrenia. She spent most of her time naked, rocking back and forth in her cell. The doctors then asked Laing for his medical opinion. Suddenly, Laing stripped off his own clothes, entered her cell, and began to rock to the girl’s own rhythm. This happened for approximately 20 minutes. Soon after, the girl started speaking, something she had not done in months. Laing then commented to the doctors, “Did it ever occur to you to do that?” As if Howe was specifically describing what Laing had in mind, he wrote:

It is meeting, PERSON to PERSON, SPACE to SPACE; and realizing that now anything can happen, come what may, within the reasonable requirements of the ultimate safety of both parties, without the necessity of stopping the development of the shared ‘experience’ (Howe, 1965, pg. 89).

CHAPTER 8

Psychology for the Whole Man

“Whole-man, like whole-truth, is reversible and self-contradictory, whereas half-men and half-truths are single, simple and apparently free of paradox, until they are at last recaptured by their own shadow selves” (Howe, 1974, pg. 154).

Howe's Psychology for the Whole Man

Throughout the 1960's, Howe saw what he called “the wind of change” occurring in both psychiatry and psychotherapy. He was referring to the new psychologies and psychotherapies that had been developed in both Europe and America. The field of human consciousness was a burgeoning discipline. Westerners were becoming more interested in the traditions of the East: Buddhism, Taoism, Hinduism, and Zen. Many psychiatrists and psychologists were abandoning the previously cherished psychoanalytic and medical models in favor of humanistic, existential, and transpersonal approaches to healing. Howe hoped that the new models for the praxis of a healing would change, not only the doctor-patient relationship, but also relationships in general. Moreover, he hoped that a new philosophical anthropology would challenge the hallowed place of “egoic man” and give rise to a “psychology for the whole man.”

Despite the apparent “growth” in psychoanalysis during the first half of the 20th century, the philosophical underpinnings of mainstream psychoanalysis remained the same. Orthodox psychoanalysis, which was prominent in the early part of the 20th century, was challenged (in the United Kingdom) by Melanie Klein

in the 1930's. Those who remained faithful to Freud's doctrine included Ernest Jones, the Glovers, and James Strachey. Orthodox psychoanalysis flourished till World War II in the United States, after which point it combined with ego-psychology (Anna Freud, Heinz Hartmann) and held uncontested sway over psychiatry till the mid 1960's. In the United Kingdom, the split between Anna Freud and Melanie Klein created a space for a creative middle school to emerge and flourish from the 1950's onward. Nevertheless, for many psychoanalysts in the first half of the 20th century, clinical experience had demonstrated that many of Freud's tenets needed to be revised and that some needed to be abandoned outright. The loyal opposition, the crypto-revisionists, and the dissident fringe all moved psychoanalysis forward by further developing and revising Freud's ideas. Yet, despite the fact that psychoanalysis evolved as a result of the pioneering work of many of its practitioners, philosophically its foundation remained the same. The changes that were made to its theory and practice were superficial and not profound. No matter the revision or the adaptation, whether Individual Psychology, Bioenergetics, Lacanian Psychoanalysis, or Object-Relations, they each preserved the status of "egoic man." By making this assertion, I am suggesting that the various schools of psychoanalytic therapy did not help the patient move beyond his ego. Granted, in the case of psychotics and personality disorders, the psychoanalytic therapies, as well as behavior therapy and cognitive therapy, function to strengthen the ego, which is needed in treating the pre-personal psychopathologies. Yet, with typically neurotic individuals whose egos

are well bounded and structurally sound, the conventional psychoanalytic therapies did little to effect fundamental change. The reason was that the various readings of Freudian theory, including Freud's own reading, did not permit for the opportunity for ego-transcendence.⁴²

All of Howe's writings, not just his later writings, provide suggestions for a psychology for the whole man, a psychology that includes ego transcendence. Yet, unlike many of his transpersonal and humanistic contemporaries, Howe did not abandon psychodynamic psychology. He read psychoanalysis differently than Adler, Lacan, Klein, Winnicott, and Reich, for example. Howe's reading was more existential and phenomenological, as well as metaphysical.

The "New" Science

Howe wrote that "in reference to the psychology of the whole man, which I believe to be our general trend toward wholeness, I would pick out particularly (a) a new attitude toward relationships and (b) a new development in the meaning of the word 'scientific'" (Howe, 1965, pg. 202). Howe (1965) stated that the status of the word 'scientific' could be extended from its limited position of authority in a three-dimensional world to include the larger TRUTH, which is observable when we study multi-dimensional reality (pg. 205). What did Howe mean by "multi-dimensional" reality in contrast to three-dimensional reality? From his perspective, "reality" could be studied from multiple perspectives. Howe (1965) stated, "an elephant or a diamond may have many aspects; but from which ever angle we may

⁴² The grand paradigm interpreted genuine ego-transcendent experiences as regressions.

look at TRUTH, there can only be one TRUTH (pg. 205). He went on to suggest that if there is only one TRUTH, why can't there be one SCIENCE? TRUTH is different from truth and SCIENCE is different from science. In Howe's system, we move from the undifferentiated to the differentiated, from the ONE to the two. Thus, PRIMARY CONSCIOUSNESS, TRUTH, SCIENCE, and the SELF, from Howe's perspective, are all inter-related. Egoic man purports to grasp the TRUTH by truth. He imposes a three-dimensional perspective on a four-dimensional, multi-dimensional reality. He believes that he has arrived at TRUTH by his understanding of a single quadrant. Thus, the nature of reality *has* to be viewed from the single perspective from which he stands. For example, if he stands from the perspective of Howe's point A, then TRUTH *must* be in accordance with the various meanings associated with that particular point. All other points or perspectives are invalid.

In practice, Howe's "science" would be similar to Laing's "science of persons," whereby relationships are horizontal rather than vertical, where the "between" in any relationship is more important than the ego or the so-called "truth." Ego-transcendence is not necessarily "spiritual," in the more traditional sense of the term. Rather, from Howe's scientific perspective, ego-transcendence referred to a shift in emphasis from the ego and the unconscious to the between and the SELF. Howe's version of the unconscious not only included the orthodox psychoanalytic conception, but also implied that the unconscious is the unknown

element that is integral to the between in any relationship, whether intra-psychic or interpersonal.

Despite the fact that egoic man seeks absolute mastery and control, and deludes himself into believing that he is in complete control, he is actually dependent upon a quality that is beyond his control. Certainly, he cannot control his autonomic functions; he is dependent on them for his very survival. According to Howe, egoic man is actually dependent on a SELF within himself who is actually wiser than he knows (Howe, 1965, pg. 204). Howe went on to ask the question, “What if this is psychologically true, and no longer to be regarded as some particular religion’s dubious appropriation of a myth in order to preserve its own advantage?” (Howe, 1965, pg. 204). Implicitly, Jung was perhaps the first depth psychologist to ask this question. The SELF is not the privileged domain of Christians, Buddhists, Hindus, Jews, or Muslims. Rather, it is the psychological property of all sentient beings. From an esoteric point of view, it connects the practitioners of all the exoteric religions together. From a psychological perspective, it further shifts the focus of attention away from the ego and more toward wholeness.

Howe (1965) wrote,

If we believe with Heraclitus that ‘All things flow’, then even the meanings of our words must flow. A psychology which has progressed from a static concept of instincts through a dynamic concept of unconscious motives can now proceed still further to appreciate the fact that *an experience of an personal relationship is unknowable, unrepeatable and conceptually indescribable* (pg. 204).

From Howe's vantage point, from the perspective of his psychology for the whole man, we are moving toward a psychology of relationship. Howe was not stating that psychoanalysis *must* move in that direction. He was simply making the observation that psychoanalysis *is* moving in that direction. It progressed from Freud's early metapsychological speculations to the dynamic relationship between the unconscious, conscious, and pre-conscious, the id, ego, and superego to a psychology of relationship.

Howe (1965) made an interesting comment on the history of psychoanalysis when he wrote,

Psychology today, after a brief evolution of fifty years, has proceeded by a succession of pendulum reactions, to Freud from Queen Victoria, to Jung from Freud, to Adler from both, and to the rest of us from all of them; until either we do not know where we are and so have abandoned them all, or else have become of necessity protectively identified with one or other of these alternative 'systems.' However good the clinical observations of the great psychologists of our time may have been, their deductions therefrom have been whipped up into a froth of words, by means of which they have progressively described the indescribable (pg. 205).

Thus, the question as to where Howe stands in relationship to the history of psychoanalysis becomes clearer in one respect but also more complicated in another. With the publication of *Cure or Heal?* in 1965, has Howe "abandoned" Freud, Jung, and Adler because he "did not know where he is?" Or, has he "protectively" identified with one of the "alternative systems?" Howe was of the opinion that to "present the universe as a scientific system was to destroy it" (Howe, 1965, pg. 205). From Howe's perspective, it was not necessarily the case that Freud, Jung, and Adler, for example, presented the universe, and human

behavior, as a scientific system, even though many of their ideas have become systematized. Even Freud, did not believe that psychoanalysis “explained the universe.” The fact that Freud, Jung, and Adler have been appropriated as comprehensive *Wettanschauungen* was due more to the influence of their respective disciples. Orthodox Freudians wrote as if Freudian theory could explain all human experience and behavior, sane or disordered. Just as there were and are orthodox Freudians, there were and are orthodox Jungians and Adlerians, who believe that their particular system explains the psyche and the cosmos, and that all other systems are “wrong.” Howe seemed to associate “systems” with the orthodox. The logic is that only the orthodox can purport to have a system. Just as slavish obedience to systems obstruct or impair our openness to experience⁴³, Howe stated that “to present an illness as a clinical entity is, in the long run, to destroy the patient” (Howe, 1965, pg. 206).

Howe's Metaphysics

At the time Howe wrote *Cure or Heal?*, he felt that insights derived solely from clinical methods were not enough to explain patients' behaviors. In actuality, rigid adherence to such methods did harm to the patient. He felt that, unless “all psychological experience and opinion to be checked against an adequate philosophic and metaphysical system at the back of it, psychology will remain in the state of disreputable confusion” (Howe, 1965, pg. 206). Hence, it could be

⁴³ Systems can and do actually create pathways for the further expansion of awareness. Thus, Howe did not object to the utilization of philosophical and/or psychological systems to highlight aspects of experience. Rather, he objected to the *uncritical use* of systems.

said that beginning in *Cure or Heal?*, and continuing in the posthumously published *She and Me* (1974) and *The Mind of the Druid* (1989), Howe shifted his focus more toward metaphysics and away from clinical methodology which is based on observation, “because our data are so much more than the eye can see or the hands can touch at the bedside.” So, while Howe may have abandoned the purely psychological and orthodox psychoanalytic systems to explain and interpret patients’ thoughts, feelings, and behaviors, he sought to develop a system of his own that was more philosophical and metaphysical. By so doing, he hoped to clear up the confusion that he believed was caused by the conflicting psychological systems of the 20th century.

What does Howe mean by “metaphysics?” During the 1960’s, “metaphysical” had become somewhat of pejorative term from a scholarly, intellectual, and natural scientific perspective. At the time, and to this day, it is often synonymous with various “new age” philosophies. When one thinks of metaphysics, topics such as channeling, ESP, and telekinesis come to mind. That being so, Howe began his analysis of “metaphysical” by going back to Aristotle. Following Aristotle, he stated that egoic man defines metaphysics as ‘the principle of things, first principles of philosophy, the ultimate science of Being and Knowing’ (Howe, 1965, pg. 206). In order for such a definition to be possible, said Howe, Aristotle would have to first divide the universe, and subsequently separate reality in terms of categories, and eventually begin the process of “seeing things by themselves,” or as disconnected from other things/phenomena. An

“order of things,” a hierarchy of classes and structures, psychological, cultural, social, and/or physical, becomes established as the basis for an egoic, three-dimensional reality. A-polarity is now a possibility, not because it represents any real phenomenon, but because of the lack of relatedness that is now part of the Aristotelian system of reality.

Howe stated that egoic man, who is a product of an Aristotelian cosmos, misunderstands metaphysics. Howe asserted that, in order for metaphysics to be understood, we have to go back to the meaning of the word. The Greek *meta*, according to Howe, means “mid” and is analogous to the Latin ‘trans.’ Thus, metaphysics can be defined as “between the physical” or “trans-physical.” “It is the ‘between-ness’ of the middle way, the hidden meaning of experience” (Howe, 1965, pg. 207). Howe made the interesting point that the word “metal” comes from the Greek root “meta.” Metal, whether or precious or not, is found by digging underground, going beneath the surface. Metaphysics, as “between-ness,” as the “hidden meaning of experience” is often concealed. It cannot be easily found. That is why, from Howe’s perspective, the new age “metaphysical” writers who claim to have easy access to the occult, to the esoteric, etc. are more than likely magicians, in the sense that “magic” is based on the Sanskrit, “maya” (illusion). They are creating the illusion that they have understood or experienced the metaphysical.

The basic principle for Howe’s metaphysics, the principle upon which the psychology for the whole man rests, is that life is relationship; life is meeting.

Throughout Howe's writings, this principle became axiomatic. It was the axiom that egoic man does not *live* in his approach to life. Egoic man, as a separate entity, as a-polarity, cannot exist in relationship. His so-called "relationships" consist of co-existing with other separate entities, occupying the same space, but never meeting. For meeting to occur, from Howe's perspective, egoic man would have to radically question his place as the center of an Aristotelian universe. He would have to empty himself for the sake of the other, to be where the other is, to share his place. Because relationship is essentially mysterious, egoic man wants to abstract for himself something that he can fix; he wants a measure of certainty that will provide him with the security that the experience that he is now enjoying can be repeated. Thus, the primary experience of relationship that may be initially encountered by egoic man is covered over or concealed by the fact that he cannot exist in the *now*. When the opportunity for meeting presents itself, psychologically, he is somewhere else, namely, trapped within himself.

Egoic man, said Howe, "is you and I and all of us. There is really no one else" (Howe, 1965, pg. 215). In reality, when we strip away even Howe's terminology that defines his own metaphysical system, the place of egoic man has been addressed by all of the great depth psychologists. Freud tried to show that it was not consciousness that was most important but the unconscious; moreover, that the ego, as 'I', was only partly conscious. Jung, especially in his later works, shifted his focus toward wholeness, to the psychology of Self-realization. Howe acknowledged that we are all primarily egoic, which includes all of the great

religious, philosophical, and psychological systems that have been developed throughout the ages. Thus, if all of the systems are primarily egoic, is Howe's own metaphysical system egoic as well? Yes, as an admitted by egoic man created it. However, implicit in every system, whether metaphysical or psychological, lies the opportunity for creating wholeness. By explicitly developing a metaphysics for psychological experience, Howe opened the door for other systems, with their respective psychotherapies, to move toward transforming egoic man toward whole man.⁴⁴ According to Howe (1965), the transformation can occur in psychotherapy when the patient,

Realizes that one-time feared and dreaded enemies, both inside and out, are slowly and mysteriously changing their very nature to become our friends. It is this healing, or making whole, which egoic man is capable of discovering in his fuller experience of relationship both within himself and with those who are his neighbors in his other world (pg. 216).

Egoic man is a more primitive version of whole man. Egoic man can become whole man. In Howe's early work, *I and Me: A Study of the Self* (1935), he posited the existence of at least two selves – the 'I' and the 'Me'. Identification with either the 'I' or the 'Me' can lead to egoic man. The outcome of any identification is a lack of relatedness; it excludes one half; it only accepts the in-group at the expense of the out-group. He lives in a world of "enemies," "destroyers," "infidels," "heretics", while he and his "kind" are the "chosen ones," the "saved," the "faithful," and the "pious." According to Howe (1965), in order for wholeness to occur, this process must be reversed,

⁴⁴ From Howe's perspective, this transformation can and should occur in both therapist and patient.

To enable him also to experience the great reversal which turns enemy into friend and destroyer into creator, it will be necessary for him to let the wind of change blow even where it listeth, which will often prove to be the reverse of all that seems most right and good for him. But it is required of us all at time to experience this reversal, from gain through loss to gain, from joy through pain to joy renewed and, from life through death to larger LIFE regained (pg. 216).

CHAPTER 9

Time and the Unconscious

Howe's Dialog with Jung

Dr. J.A. Hadfield, of the Tavistock Clinic, invited Jung to give a series of five lectures, which he delivered from September 30 to October 4, 1935. Most of the audience, approximately 200 in number, consisted of members of the medical profession. Many notable psychoanalysts and psychiatrists were in attendance, including many founding members of the Tavistock Clinic, H. Crichton-Miller, H.V. Dicks, Wilfred Bion, Ian Suttie, and Eric Graham Howe. Bion, Suttie, and Howe were participants in the discussion of Jung's first two lectures, although, they did not participate in the discussion of the final three.

The purpose of Jung's lectures was to outline his psychology, specifically in relation to Freud and Adler's.⁴⁵ In the discussion of lecture 1, Howe began his series of questions to Jung by asking if emotion and feeling can be equated with conation and cognition. Jung agreed with Howe, stating that Howe's assertion was basically correct in that it stated in "philosophical terminology" what Jung put in psychological terminology. Howe then stated that Jung's classification of the four functions corresponds to the spatial and temporal: one-, two-, three-, and four-dimensional classification system. He then went on to point out that Jung, in his lecture, used the phrase, "three-dimensional" in reference to the body and that

⁴⁵ During the 1930's, when Jung delivered his lectures, orthodox Psychoanalysis, Adler's Individual Psychology, and Jung's own Analytical Psychology were the three major schools of depth psychology.

the function of intuition differed from sensing, thinking, and feeling in that it included the element of time. Howe then questioned Jung as to whether intuition corresponded to the fourth dimension. He then summed up his position by providing his own four correspondences in relation to Jung's four functions: "Perhaps, therefore, it corresponds to a fourth dimension? In that case, I suggest that 'sensation' corresponds with one-dimensional, 'perceptual cognition' with two-dimensional, 'conceptual cognition' (which would correspond with your 'feeling') with three-dimensional, and 'intuition' with four-dimensional on this system of classification" (Jung, CW: 18, pg. 28). Again, Jung fundamentally and for the most part, gave his consent to Howe's statement. Yet, Jung and Howe seemed to disagree as to the possible existence of the fourth dimension. Jung felt that Howe went too far in his assertion that the function of intuition is based on the experience of a fourth dimension, where chronological time gives way to an experience of the timeless: "Since intuition sometimes seems to function as if there were no space, and sometimes as if there were no time, you might say that I add a sort of fourth dimension. But one should not go too far" (Jung, CW: 18, pg. 28). Jung, especially in his early writings, was primarily an empiricist and a scientist; thus, the concept of the fourth dimension to which Howe speaks was seemingly dismissed by Jung because "it does not produce facts" (Jung, CW: 18, pg. 28).

Nevertheless, in Jung's 1952 essay on synchronicity, he posited what he referred to as "the a-causal connecting principle" or the "meaningful coincidence

of two or more causally unrelated events.” He attempted to verify with empirical evidence the validity of ESP, Astrology, I-Ching, and other divinatory practices. Jung’s position in 1952 flatly contradicted his position in 1935, as the validation of synchronicity would suggest the existence of a fourth dimension. The various divinatory practices that Jung researched pointed to its existence. Intuition, according to Jung, is akin to H.G. Well’s Time Machine:

(Speaking to Howe) You remember the time machine, that peculiar motor, which when you sit on it moves off with you into time instead of space. It consists of four columns, three of which are always visible, but the fourth is visible only indistinctly because it represents the time element. I am sorry but the awkward fact is that intuition is something like this fourth column (Jung, CW: 18, pg. 28).

As brilliant as Jung’s analogy is, it seemed to suggest that simply because intuition is not visible it cannot be demonstrated empirically. While this may be true, from a strictly natural scientific perspective, a paradigm in which the Jung of the 1930’s was operating, from Howe’s point of view, the existence of a fourth dimension does not necessarily require empirical evidence for its existence. Howe disagreed with Jung because he (Jung) was relying too heavily on direct observation to prove the existence of what he believed to be a metaphysical fact.⁴⁶ From Howe’s perspective, Jung made his conclusion in reference to intuition because he (Jung) did not have a clear philosophical or metaphysical system on which to base his empirical approach. While Jung seemingly dismissed intuition, he proposed that

⁴⁶ Recall that in 1965, in *Cure or Heal?*, Howe argued that “clinical methods,” which were based on direct observation, were no longer enough, because “our data are so much more than the eye can see or the hands can touch.” Although this position was explicitly made in 1965, this idea is evident even in Howe’s early writings.

“unconscious perception” could be empirically demonstrated. For Jung, “unconscious perception” referred to perception by means that are unconscious to the perceiver (Jung, CW: 18, pg. 28). This could simply refer to seeing, hearing, tasting, and touching, all forms of sensual perception. Yet, unconscious perception can also refer to the function of intuition, if we view intuition, from Howe’s metaphysical perspective, as a type of sense. For example, a person can say that he “sees,” but cannot (empirically) explain the neurological and psychological processes that make his vision possible. Similarly, a person can say that he experienced an intuition, a premonition, and then point to the fact that his intuition “came true,” but cannot explain the connection between the experience and the empirical fact that “came true” several days later. Just because both “seers” cannot explain how they saw, that does not mean that each did not “see.”

Howe remained silent for the remainder of the discussion of Jung’s first lecture. In the discussion of Jung’s second lecture, Howe again made his voice known, this time in reference to Dr. Eric Strauss’s question in response to Jung’s discussion of his word association experiments conducted between 1904 and 1910.⁴⁷ Howe felt that during the discussion of the first lecture, Jung merely “reproved him for using words” (Jung, CW: 18, pg. 58). Ironically, Jung’s early experimental researches suggested Howe’s point that “words must be clearly understood,” the very basis for which Howe believed he was being reproved. At the time, Jung’s word association experiments seemingly (empirically) validated

⁴⁷ Strauss asked Jung to clarify his position on the unconscious in relation to Freud’s.

Freud's understanding of the unconscious. Jung found that certain words elicited strong physical, psychological, and emotional responses from his subjects. Thus, the word that elicited the response signified the presence of an unconscious complex. Hence, from Jung's perspective, the unconscious could be verified based on the connection between the words, or in some cases word clusters, and the specific series of responses to the words. Howe asked Jung if he ever applied his word association experiment to the words 'mystic' or 'fourth dimension' (Jung, CW: 18, pg. 58). It is likely that Howe asked this question, not out of ignorance, but because Jung, during the discussion of his first lecture, stated that intuition was not "mystical." Hence, Howe seemed to be performing his own word association experiment on Jung. He was probably more curious to know how Jung himself would respond to the words. Howe postulated that more than likely subjects, in response to the words, would either postpone/delay their responses and/or respond with intense concentration (Jung, CW: 18, pgs. 58-59). Subtly, Howe was directing his postulation to Jung himself, in addition to inviting Jung's response in general.⁴⁸ No matter how many times Jung attempted to dismiss the fourth dimension, Howe repeatedly returned to it, as he felt it was needed to facilitate understanding. During the discussion of Jung's first lecture, Howe recognized early on that he and Jung were moving toward a disagreement in reference to the intuitive function in its relation to time. Thus, he would not let Jung simply dismiss the fourth dimension on account of it not being empirically verifiable.

⁴⁸ As will soon be seen, Jung picked up on Howe's subtlety and responded accordingly.

In order to have Jung further elaborate his position, Howe referred to Jung's understanding of the unconscious. Howe asserted that Jung denied the existence of the unconscious: "I understand from Professor Jung that there is no such thing (as the unconscious), there is only a relative unconsciousness which depends on a relative degree of consciousness" (Jung, CW: 18, pg. 59). Howe then compared and contrasted Jung's system with Freud's by asserting that Jung's was four-dimensional and Freud's was three-dimensional; Jung's was fluid and dynamic and Freud's was static and unchanging. By so doing, Howe directly answered Strauss's question while Jung attempted to skirt around it. Moreover, *Howe implied that Jung was complicating his own presentation by offering a four-dimensional system as three-dimensional, that he was explaining his system in a Freudian fashion!* In essence, that Jung was dismissing the fourth dimension, which was actually implicit to his understanding of the unconscious. Howe stated:

According to Freudians, there is a place, a thing, an entity called the unconscious. According to Professor Jung, as I understand him, there is no such thing. He is moving in a fluid medium of relationship and Freud in a static medium of unrelated entities. To get it clear Freud is three-dimensional and Jung is, in all his psychology, four-dimensional. For this reason, I would criticize if I may the whole diagrammatic system of Jung because he is giving you a three-dimensional presentation of a four-dimensional system, a static presentation of something that is fundamentally moving, and unless it is explained you get it confused with the Freudian terminology and you cannot understand it. I shall insist that there must be some clarification of words (Jung, CW: 18, pg. 59).

From the perspective of Howe's own psychology of relationship, he interpreted Jung's system as relational and Freud's as a-polar.

According to John Heaton, Howe was very critical of the London school of Jungians and sympathized more with the Zurich school (Personal Correspondence, May 2003). Howe felt that the London Jungians interpreted Jung's system as three-dimensional and static, while the Zurich school read Jung in a more dynamic, fourth-dimensional manner. In his writings, Jung's concepts and his presentation are both dynamic and fluid. Howe was criticizing Jung for slightly deviating from the style of his writings, for not acknowledging the metaphysical aspect behind his psychological system. Jung's system is based on a fluid, dynamic understanding not only of the psyche, but the entire cosmos. The London Jungians, many of whom were heavily influenced by orthodox psychoanalysis and object-relations theory, in a sense, remained Freudian. They may have replaced one lexicon for another, Freud's for Jung's, but were essentially Freudian in their static, a-polar interpretation of the psyche.

Despite some disclaimers, Jung basically agreed with Howe. Jung acknowledged that everyone would have difficulty in responding to the words "fourth dimension" and "mystical" due to relative ignorance or unfamiliarity. Furthermore, Jung stated that it is complicated to allow psychology to be dynamic without recourse to expressing it in a three-dimensional fashion. Implicitly, Jung acknowledged that he did perhaps present his four-dimensional system three-dimensionally and thereby create some misunderstanding. Jung asserted that time, as the fourth dimension, was necessary when speaking of the dynamics of the psyche, yet when the word "fourth dimension" is used in reference to the time

factor, it is likely to be met with narrow-mindedness (Jung, CW: 18, pg. 59). Thus, Jung maintained his insistence that the word should not be used. Jung rightly suggested that the word is somewhat “taboo,” due to its history. If the word did not invoke confusion, it was likely to provoke scorn, especially from the scholarly and professional communities. It was often associated with occultism, esoteric philosophy, and “mysticism.” Thus, Jung did not disavow the existence of a fourth dimension, but disapproved of Howe’s use of the term “four dimensional.” Jung then advised Howe as if he were his teacher,

“The more you advance in the understanding of the psyche the more careful you have to be with terminology, because it is historically coined and prejudiced. The more you penetrate the basic problems of psychology the more you approach ideas which are philosophically, religiously, and morally prejudiced. Therefore certain things should be handled with the utmost care” (Jung, CW: 18, pgs. 59-60).

Evidently Howe did not take Jung’s advice. While he wrote about the dynamics of the psyche and was primarily a psychodynamic psychologist and psychotherapist, he repeatedly used, historically charged words, such as, “meditation,” “mindfulness,” “detachment,” and “mysticism”, to name a few. Yet, Jung himself used historically charged words, words associated with mysticism, occultism, and esoteric philosophy, even more so than Howe. Thus, to what is Jung referring when he cautioned Howe in the use of such terms?

The major difference between Jung’s use of such terms and Howe’s is that Jung always provided a detailed, historical context of the terms themselves before illustrating their relevance for psychology and/or the practice of psychotherapy.

Howe, on the other hand, provided very little in the way of historical context, if at all. Thus, in Jung's writings there is a strong historical element whereas Howe's are basically a-historical. If Howe had taken Jung's advice in 1935 it is possible that history would have remembered him. By providing more in the way of context to his ideas, by better explicating his sources, it is likely that Howe would have been written into the history of psychoanalysis.

Howe responded to Jung by stating "the audience would like you to be provocative. I am going to say a rash thing" (Jung, CW: 18, pg. 60). From Jung's perspective, Howe was already "indiscreet" and "rash" in his use of the words "mystical" and "fourth dimension." Howe further pushed the envelope by continuing his own provocation of Jung. Howe stated:

You and I do not regard the shape of the ego as a straight line. We would be prepared to regard the sphere as a true shape of the self in four dimensions, of which one is the three-dimensional outline. If so, will you answer a question: "What is the scope of the self which in four dimensions is a moving sphere?" I suggest the answer is: "The universe itself, which includes your concept of the collective racial unconscious" (Jung, CW: 18, pg. 60).

Jung then asked Howe to repeat the question. Howe responded by making his question more succinct, "How big is this sphere, which is the four-dimensional self? I could not help giving the answer and saying that it is the same bigness as the universe" (Jung, CW: 18, pg. 60). At the time of Jung's Tavistock lectures, Howe just recently finished the six lectures he delivered for the Home and School Council of Great Britain, in London, from October-November, 1934. These lectures became the basis for *I and Me: A Study of the Self*, which was published

in 1935 and is one Howe's earliest works. Howe's "selves" psychology, as was discussed in Chapter 6, included the idea of a multi-dimensional self. The whole Self, which for Howe was four-dimensional, included the entirety of the cosmos, and hence, transcended and included one-dimensionality, two-dimensionality, and three-dimensionality. Points A, B, and C were absorbed into the unity and wholeness of the Self. And as Howe acknowledged, Jung influenced his own understanding of the Self.

Jung responded to Howe by reiterating that Howe's question is philosophical and not psychological. Yet, Jung attempted to answer what he believed to be Howe's philosophical question psychologically: "The image of the world is a projection of the world of the self, as the latter is an introjection of the world" (Jung, CW: 18, pg. 60). He then asserted that only the philosopher would go beyond the world whereby things are static and isolated. Unlike Howe, Jung was reluctant to go beyond this world as he felt that it would "cause an earthquake in the ordinary mind" (Jung, CW: 18, pg. 61). Because the majority of the world believed that it was static and isolated, Jung felt that it would do more harm than good to challenge what he believed to be the consensual view of reality, "The whole cosmos would be shaken, the most sacred convictions and hopes would be upset, and I do not see why one would wish to disquiet things. It is not good for patients, nor for doctors; it is perhaps good for philosophers" (Jung, CW: 18, pg. 60).

While many of Jung's theoretical notions were revolutionary, expressing a four-dimensional view of the psyche in its relation to the cosmos, in practice he often stayed within a three-dimensional world.⁴⁹ Howe, in Nietzschean fashion, often "shook the cosmos" and "upset the most sacred hopes and convictions." Howe felt that it was often times good for both doctors and patients to question their three-dimensional, consensus reality, as from his point of view, a static and unchanging view of the cosmos, "rigidity" in one's relationship to life, was in large part responsible for the "symptoms" that were being presented in the consulting room.

Introduction to Howe's Meaning of Time

We are told by those who ought to know, such as mathematicians and philosophers, that time is the fourth dimension, which goes beyond the familiar three of space. If this is so, then time is certainly outside the capacity of egoic man to comprehend it, for he is devised to dwell consciously in space, but not in time. Time, being outside and beyond his conscious mind, requires clocks to tell him of its existence. Of time itself, of experiential time, egoic man knows nothing. Not knowing that time is experience, and experience is time, it is not surprising that, as he constantly watches his clocks, saving time whenever he can, he has little time for experience, now (Howe, 1965, pg. 147).

Evidently, Howe's position on time in 1965 did not deviate much from his position in 1935. What Howe did in *Cure or Heal?* was to make his understanding of time more thematic.⁵⁰ Specifically, Howe clarified his

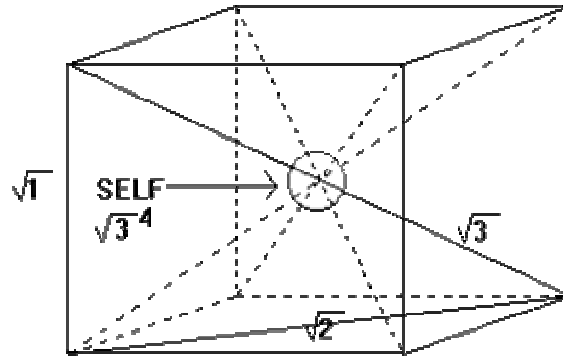
⁴⁹ It could be argued that, based on Jung's developmental psychology, it is necessary to work with patients who are in the first half of life within a three-dimensional system, practicing a predominantly Freudian-based psychotherapy. However, when patients are in the second half of life, middle age to old age, it is necessary, barring the presence of an abundance of fixations and unresolved complexes, to work within a four-dimensional system, practicing a more transpersonally based psychotherapy.

⁵⁰ He began to write about his understanding of time in relation to metaphysics in 1937 in *War Dance* and further refined it in 1965 in *Cure or Heal?*

distinction between three-dimensional man, egoic man and four-dimensional man, the whole man. Howe suggested that one of the ways to differentiate between the two types is by the respective ways in which they each understand time. Egoic man knows “clock” time while the whole man knows experiential time. From Howe’s perspective, because egoic man lives in a three-dimensional, static, apolar, unchanging world, he cannot grasp experiential time. Based on Jung’s point of view, Howe, by his insistence on using “fourth dimension” to describe time, placed himself in the company of those that are most associated with the term, namely, “mystics.” As has been mentioned, Howe was not necessarily concerned with how he was going to be remembered. For him, the “fourth dimension” was a suitable philosophical and metaphysical backdrop to situate many of his own as well as his patients’ psychological experiences.

The Meaning of Time and Fractal Geometry

One of the best ways to understand Howe’s concept of the fourth dimension, as the meaning of time, is to situate it in relation to fractal geometry. From the vantage point of fractal geometry, the fourth dimension, which comprises the space-time continuum, is reality. In the fourth dimension, the infinite numbers of phenomena are related to one another through both time and energy. In the Time domain, the Fourth Dimension continues the movement of the Third Dimension (Past) to form a wave, constituting (fractally) the space-time continuum. (www.fractalwisdom.com). The fourth dimension is portrayed geometrically by what is called the hypercube:



From the center of the cube, which can be likened to Howe and Jung's understanding of the Self, through its eight diagonal lines the Self is related to the entirety of the cosmos. Four diagonals to form a center point cut the hypercube.

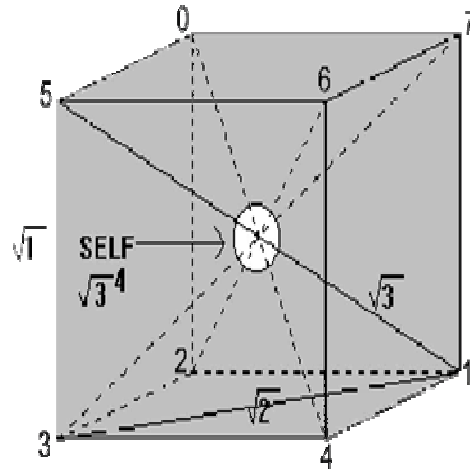
The center point is akin to Howe's PRIMARY CONSCIOUSNESS, SELF. What is meant by infinity, in the fourth dimension as experiential time, is the infinite number of relationships that can simultaneously exist at any one moment in time.

"The number of the diagonals is $4 \times 3 = 9$, according to the Pythagorean theorem.

The four diagonals are 1-5, 2-6, 3-7 and 4-0" (www.fractalgeometry.com).

The four diagonals are as follows:

- 1-5 Matter
- 2-6 Consciousness
- 3-7 Energy
- 4-0 Self-Organization



The fourth dimension is the space-time continuum of man and the cosmos where there is a continuous feedback loop. The fourth dimension includes the first three dimensions, but also the gaps or intervals between them, the fractal dimensions (www.fractalwisdom.com).

Matter, energy, consciousness, and self-organization all intersect at the point of the Self. Thus, Howe's conclusion in 1935, that the Self is as "big as the universe" complements fractal geometric theory, yet paradoxically, it is as small as the universe as well. Fractal geometry is based in large part on chaos theory and quantum mechanics. Hence, Howe's understanding of experiential time, time as four dimensional, time as understood by the whole man, could be appreciated as a kind of psychology of chaos. Master Dogen, a 13th century Zen Buddhist monk, and the founder of the Soto school of Zen, had a similar concept of time that he called being-time: "Whenever anything happens it happens now and 'now' is this 'happening.'" Dogen's being-time nicely complements Howe's assertion that time is a function of movement-in-relationship; it is a gestalt-of-three, its items

indivisible other than by the bridge of the relationship which joins them (Howe, 1965, pg. 147). Recall that from Howe's perspective, the self is a "moving sphere" rather than a straight line or even a hypercube. Yet, the hypercube, from the perspective of Fractal Geometry, nicely complements and further represents in pictorial fashion Howe's descriptions of the self as a "moving sphere." No matter where it moves, whether we are talking about Howe's "moving sphere" or Fractal Geometry's Hypercube, the cosmos moves with it. The cosmos from Howe's perspective, and from the perspective of fractal geometry, is both fluid and dynamic. Thus, like time itself, as the nature of reality, it is movement-in-relationship. Hence, matter, consciousness, and energy will eternally intersect at the point of the Self. Because this is the case, awareness or gnosis of experiential time is simultaneously Self-Knowledge as well as Cosmic Knowledge.

The fourth dimension, as experiential time, as a function of movement-in-relationship was integral to Howe's practice of psychotherapy; thus, it was not simply a metaphysical or philosophical speculation. In actuality, it was part of the foundation for his praxis of healing. Howe (1965) stated that he was sometimes asked, "If you do not use either knives or drugs, what do you do for your patients that justifies your charging fees?" His answer was that he gave them TIME (pg. 159). What did Howe mean by this simple, yet mysterious, assertion? Egoic man, while he certainly lives by the clock, ironically, never has enough time. His calendar and appointment book are full of routines, activities, dates, meetings, etc. Yet, at the end of his day, despite the fact that there is some measure of

satisfaction, there is a part of him that feels unfulfilled. What he forgot, during his day, was he, himself, and by virtue of forgetting himself, he forgot the other. He was immersed in his three-dimensional, static world, not genuinely relating to any one or any thing, despite the fact that an infinite number of possibilities were presented. He was unconscious of the four-dimensional reality in which he existed. This is not to say that Howe attempted to “awaken” his patients to this reality. By giving his patients time, he gave them what they were not allowed to have as children. Howe (1965) made the important point that “the therapist, in giving his own time (with a small t) is giving the patient his own TIME, which is his source of PERSONAL healing within himself (pg. 160). The therapist is the catalyst for the healing process to occur in time. What does the healing, from Howe’s perspective, is the SELF, HEALER, TIME. All three terms are synonymous with the Center of the Cosmos. Pascal stated that nature is an infinite sphere whose center is everywhere and circumference nowhere. The fourth dimension, Time, as a function of movement-in-relationship, is the healer of wounds, the comforter of pain. The patient must be “patient,” he must, at times, wait for TIME to heal him. By giving his patient time, the time that he never had as a child and still does not have as an adult, the therapist is creating a space for the dawning of TIME, the movement of the third-dimension, a tectonic shift of what was previously a static psyche.

CHAPTER 10

*War Dance: Howe's Psychology of War*⁵¹

“War is the spectacular and bloody projection of our everyday life, is it not? War is merely an outward expression of our inward state, an enlargement of our daily action. It is more spectacular, more bloody, more destructive, but it is the collective result of our individual activities. Therefore, you and I are responsible for war and what can we do to stop it? Obviously the ever-impending war cannot be stopped by you and me, because it is already in movement; it is already taking place, though at present chiefly on the psychological level. As it is already in movement, it cannot be stopped — the issues are too many, too great, and are already committed. But you and I, seeing that the house is on fire, can understand the causes of that fire, can go away from it and build in a new place with different materials that are not combustible, that will not produce other wars. That is all that we can do. You and I can see what creates wars, and if we are interested in stopping wars, then we can begin to transform ourselves, who are the causes of war.”

~ Krishnamurti (1996)

An Introduction to Howe's Psychology of War

As indicated in the Introduction, Howe served in India during World War I but did not see any fighting. This provided Howe's first direct encounter with Indian Philosophy. Indian thought, especially Vedanta, Buddhism, and Tantra, exerted a profound impact on Howe's psychology. In 1954, he would go to Burma and Ceylon to study Theravada Buddhism, and was greatly influenced by Nyanaponika Thera's form of mindfulness meditation. Howe wrote the preface for the 1st edition of Thera's book *The Heart of Buddhist Meditation* that was originally published in Ceylon. Howe also corresponded regularly with Arthur Avalon, the author of a famous book on tantra *The Serpent Power*. According to

⁵¹ Interestingly, *War Dance* is Howe's only book to have been reprinted by Haskell House Publishers in 1971.

Heaton, Howe taught that tantra was not a technique but a developmental process (Personal Correspondence, May 2003). Like with both Kundalini Yoga and some Kabbalistic schools, psycho-spiritual energy, as discussed in many forms of tantric practice, rises from base matter to pure spirit, and promotes psychic evolution.

While Howe's relationships with Nyanaponika Thera, Arthur Avalon, and Krishnamurti, certainly exerted a profound impact on his psychology and philosophy of life, they also influenced his position on war.

Before discussing Howe's psychology of war, it would be useful to provide a brief overview of the psychology of war as understood by both Freud and Adler. Freud and Adler, were both profoundly affected by World War I. In 1915, Freud published his *Thoughts for the Times on War and Death*. In this essay, Freud stated that the aggressive instincts were stronger than contemporary civilized man had believed, and he saw the handling and channeling of aggressiveness as the main problem (Ellenberger, 1970, pg. 473). In a letter to Albert Einstein in September 1932, Freud asserted that it would be difficult to secure peace due to man's inherently aggressive and destructive instincts. According to orthodox Freudian theory, war often begins when the death instinct (Thanatos) in an individual or group is turned outward toward the world and away from the ego. For Freud, this signified an unconscious defense to protect the ego. In 1918, a Swiss journal published a short note of Adler's with the title, *A Psychiatrist on War Psychoses* (Ellenberger, 1970, pg. 587). In that note, Adler asserted that people went to war to escape the feeling of being helpless. In 1934, Adler further

elaborated his earlier position by stating that war can be considered as one of the forms of mass psychosis provoked by a few men in search of power in their own selfish interests (Ellenberger, 1970, pg. 611). Thus, for Adler, war is as a result of the insidious effects of an inferiority complex. While Freud and Adler both had brilliant insights into the psychology of war, neither man devoted an entire book to the topic, despite the fact that war ravaged Europe for nearly half a century. In terms of the history of psychodynamic psychology, Howe was the first psychodynamic theorist to publish an extended treatise on the psychology of war in the 20th century.

War as Fundamentally Schizoid

If we can learn to live within the discipline of this conjunction ‘and’, then the matter of our relationships can still be at peace; but if we adopt the attitude of moral prejudice which insists upon a selection between you or me, by which the wrong must be eliminated, then we are involved in conflict, for ‘ought’ means WAR (Howe, 1971, pg. 59).

According to Howe, “moral prejudice,” “conflict,” and “ought” are all symptoms associated with the belief that we are living in a three-dimensional world where phenomena are static and unrelated. Howe, in his analysis of war, returned to his four-dimensional model of the cosmos as a means to confront war’s insidious effects. In reality, said Howe (1971), where the pattern of life is both “cruciform” and “circular,” it is necessary to adopt what he calls the four-dimensional metaphysic of the double duality (pg. 59). While this may sound complicated, in practice it is quite simple. Instead of hiding behind moral imperatives or either/or dilemmas, Howe suggested that we do not simply attempt

to annihilate the particular pole that is undesirable, thereby, leaving one pole, one-side, existing without relationship.⁵² Howe wrote, “The truth is found, not by elimination of the undesirable, but by a fuller vision which allows for the supremacy of the unseen” (Howe, 1971, pg. 59).

Conversely, for Howe WAR results from an attempt to separate so-called light from darkness, good from bad, moral from immoral. The imperative is that those aspects of a given individual, society, and/or culture that are identified as psychologically unacceptable or are emotionally threatening MUST be eradicated. If the undesirable attribute were identified to exist within the individual who is examining his own conscience, the results of such an exploration would not be as deleterious. Instead, due to the intensity of the feeling associated with the attribute, the individual dis-identifies with what is undesirable and begins to look for it in the other. Hence, in psychoanalytic terms, he splits and then subsequently projects the dissociated part of the psyche. The other, which could be an individual, group, nationality, ethnicity, or culture, becomes the carrier for that which is “bad,” “evil,” “immoral” in his own psyche. Collectively, when individuals become groups, the paranoia associated with such a projection becomes epidemic. Thus, the either/or, in-group/out-group, good/evil polarity becomes schizoid. From Howe’s perspective, the unity that connected the two poles becomes severed and the seeds of war are sown. War itself is inherently schizoid. It only exists in a

⁵² To use Howe’s terminology, eliminating one pole or one side of an apparent duality of opposites creates the condition for a-polarity.

three-dimensional world; only egoic man wages it. He wants to ensure that nothing changes, that everything remains the same. Anything or anyone that poses a threat to his “security” MUST be destroyed.

Three Forces for War: Hypersensitivity, Suggestibility, and Protective Identification

For Howe, there are multiple “forces for war” (Howe, 1971, pg. 205). One of the major forces for war, according to Howe, is hypersensitiveness, an attribute that can be either a curse or a blessing. Howe suggested that it is often the case that those individuals who are most sensitive are also those that are most alive. Many creative individuals, such as artists, poets, and musicians, would be considered ‘hypersensitive.’ Howe associated the hypersensitivity of an artist, for instance, with what he called, “the artistic temperament” (Howe, 1971, pg. 205). Hypersensitive people often experience both poles of a given continuum of opposites with the utmost intensity. When depressed, the experience of depression is to such an intense degree that suicide sometimes emerges as an extreme possibility. When elated, the experience often propels the hypersensitive individual into flights of mania, many times with the near delusional belief that any and all boundaries can be exceeded. The aforementioned hypothetical hypersensitive individual represents the extremes of a given bipolarity. From Howe’s perspective, the extremes are experienced because the bridge between the two poles, happiness and sadness, is broken. It is as if the hypersensitive person becomes confined to one pole and cannot find his way out. The only way to find

temporary respite is for him to completely exhaust the pole itself. In less extreme cases, Howe (1971) asserted, where a given individual's hypersensitivity functions as a source of creation, where his response to life is that of an embrace, he is often compelled by the repressive forces that exist within a given society to "adopt a defensively negative attitude, instead of that positive one that, being the prerogative of life and growth, also belongs to the artists whose task it is thus to manifest it, sensitive, moving, and strong" (pg. 206). When Howe spoke of an artist in this sense, he was not simply speaking about writers, painters, poets, etc. Rather, he was talking about those that were artists of life, which was not antithetical to egoic man but included and transcended him. Unlike some mystics and ascetics who seek to annihilate suffering by eradicating the pole that stands in opposition to their cherished notions of "enlightenment," Howe's artist of life understands that suffering is the "penalty of deep living" (Howe, 1971, pg. 206). To live deeply, and not superficially, one must inevitably suffer; it is one of the "laws of life."

According to Howe, those who retain their sensitivity, those whom he called "teachers of the art of life," they have learned how to suffer by "accepting reality in its full intensity, seen and unseen" (Howe, 1971, pg. 207). The acceptance of the entire spectrum of reality, that which is both seen and unseen, requires, a metaphysical approach to reality whereby there is a tacit recognition that conclusions reached through sensual perception are fundamentally limited. While hypersensitivity can function as a means to attune to both self and world, it

can just easily become both negativity and defensiveness. For Howe, this negativity, coupled with defensiveness, can become a “habit” to the extent that our overall attitude toward life becomes lived, not as an embrace, but as a contraction from life. Howe (1971) stated that the repeated NO’s that we have heard throughout our lives become KNOTS, and thus, while we are living in the ‘now’ we act as if we are living THEN (pg. 208). Life becomes a virtual, perpetual negative transference. It becomes, in Howe’s words, a “defensive illusion of our own creation.” We insist that this illusion is reality and attempt to convince others who do not share our illusion that we are “right” and they are “wrong.” Static, unchanging definitions of what constitutes “morality,” “insanity,” “normalcy,” “good,” and “evil” are created based on the very illusion itself. Howe stated that we live within a “shell of circumscription” and thereby regard ourselves as “normal” (Howe, 1971, pg. 209) and those that live outside the shell of circumscription as “abnormal.”

According to Howe, hypersensitivity, in and of itself, is not necessarily problematic. However, it can give rise to suggestibility, which is when we open ourselves to what Howe called “protective identifications.” Protective identification, not to be confused for projective identification, “avoids the intolerable suspense of thought: but more than that, it offers a form of action that also solves the problem by assuming its successful conclusion” (Howe, 1971, pg. 210). For Howe, the defense of protective identification, which is usually unconscious, is most evident when we identify with objects or opinions associated

with power. When a person identifies with a country, ethnicity, religion, philosophy, or social group, he may be, from Howe's perspective, solving a psychological problem via identification, and hence, avoiding the intense pain and suffering that would be associated with a direct encounter. Through identification with the perceived object of power, the individual does not have to face or resolve the underlying conflict or conflicts. His conflict is resolved via a false unification with an ideology that in actuality takes his power away. He has entered his "nirvana," he has found his "kingdom of god" without any effort whatsoever. There is no more suspense because his salvation has been handed to him. As Howe suggested, he does not even have to think any more. As a result, he becomes a puppet for the propaganda machine that serves as the mouthpiece for the object(s) or ideology of power. Howe (1971) attested that,

In war suggestibility comes into its own, for action is then at a premium. With one accord, in self-defense, we obey the dictatorship of this unseen command, and moralize it, the better to feel sure this 'ought' to be (pg. 211).

The defense of protective identification becomes "moralized," thus it is not viewed as a defense, but as a kind of categorical imperative. Our obedience, our allegiance to "God," "the church," "the party," "race," "the president," "the pope," are all masks for our protective identifications. We obey the "unseen forces" that don the masks, thinking that we have found the "truth." This "truth," according to Howe, is relative to three-dimensional conditions (Howe, 1971, pg. 249). And, as Howe repeatedly mentioned throughout his writings, in a three-dimensional world, things are static and unchanging, persons, objects, and things are monads standing

in a-relationship to one another. The past and the future both exist, but never the 'now' moment. Egoic man, by living in a dead, stultified past and in a fearful, not-yet future, both fixed in their own ways, creates the powers that ultimately govern his freedom. The unseen, psychological forces, the inner dictator, eventually become the outer dictator. We believe in the veracity of the dictator's truth because he seems to be "speaking to us."⁵³

While a three-dimensional truth can possibly lead to hazardous consequences, according to Howe, it is nevertheless still a truth, albeit a limited one: "It is egotistically limited and sensorially measured, being but a slice out of time, but is in fact so limited a truth as to be but transient illusion or abstraction" (Howe, 1971, pg. 249). It does not take into account the entirety of the cosmic picture, it is a potentially violent form of synthesis that destroys opposition in its desire for sameness and thereby makes relationship impossible.⁵⁴ In war, whether a psychological war within oneself or a war between nations, the goal is for opposition to be destroyed, to create the conditions for a-polarity. It generally begins as protective identification, which is an attempt to annihilate opposition within oneself, and then materializes into a war against the other, who becomes an externalization of our own undesirable aspects.

⁵³ The "dictator," in this sense, does not necessarily have to be a single individual. It can be a body of individuals, a government, an ideology, etc.

⁵⁴ Remember, from Howe's perspective, in order for relationship to exist there has to be a duality and that both poles of a given duality have to be accepted, not from a moral or ethical perspective, but from a psychological one.

From Howe's perspective, in order for war between nations to be avoided, healing has to begin with the individual. Thus far, many of the psychotherapies, whether psychoanalytic, behavioral, cognitive, existential, humanistic, etc., have offered three-dimensional solutions to problems that, according to Howe, have been created by a three-dimensional relationship to a four-dimensional world. Each therapy has either identified with a medical model or has stood in opposition to it, thereby, facilitating rather than inhibiting the forces for a "war" between systems. To "cure," in psychotherapy, is to destroy the pole that stands in opposition to a consensus perception of what constitutes "sanity" or "normalcy." To "heal" in psychotherapy is to ultimately accept both poles of a given duality of happiness and suffering, and subsequently, embark upon what Howe calls "converted living." Converted living, according to Howe, is to "live in spite of (i.e. notwithstanding) and not 'because': unconditionally and not conditionally, which is the true meaning of the word to 'love'...'Converted love' is four-dimensional, whole, holy and healed" (Howe, 1971, pgs. 301-302).

CHAPTER 11

Psychotherapy: The Art and Science of Healing

"Truth is a pathless land. Man cannot come to it through any organisation, through any creed, through any dogma, priest or ritual, nor through any philosophical knowledge or psychological technique. He has to find it through the mirror of relationship, through the understanding of the contents of his own mind, through observation and not through intellectual analysis or introspective dissection..."

~ Krishnamurti (1996)

"The clinician acts upon information received. The psychotherapist very rarely, if ever does so. The solution must always come from inside the patient, not from the doctor, who is outside. The healing process in psychotherapy is, therefore, one which the physician is intimately involved in an experienced and ever-changing relationship, in which at different times he plays many different roles. This is sometimes called 'transference,' which refers to the fact that the psychotherapist stands as the outward and visible representative of the actual parents, as well as of the archetypal ones, who dwell unknown within us all. But the physician, be he psychotherapist, surgeon or clinical physician, always takes the projection of the 'healer' who is central to our being. It is to this miraculous but somewhat deceptive attribute of omnipotence that all doctors ultimately owe their healing power" (Howe, 1965, pg. 53).

Psychotherapy: The Art and Science of Healing

Throughout history there have been various attempts to open up individuals to an existence full of depth, wonder, insight, and meaning. The ancient Hindu philosophers relied primarily upon meditation and the practice of austerity to bring about a greater understanding of every sentient being's sense of relatedness to God. The Buddha demonstrated that awakening is present even in the smallest grain of sand. Jesus taught that the "Kingdom of God" is something to be found within man rather than outside of him. "Real" life is engaged in cultivating this "Kingdom" in an effort to bring about a deeper relatedness to one's self and fellow

man. Regardless of the particular prophet or philosopher, there was an overriding attempt at tapping into a hidden dimension of human existence that reveals the essence of our very being.

Freud was not the first to discover the unconscious, but he made the exploration of it central to psychotherapy. Like Darwin and Nietzsche before him, Freud felt that our existence was almost entirely determined by the repository of instincts and early experiences that lie deep within our psyches. Therefore, to obtain self-knowledge one must not focus exclusively on the conscious mind, but rather on the unconscious mind. In order for this to be possible, Howe felt that the therapist had to be open to how the unconscious manifests itself within the therapeutic relationship.⁵⁵ This comes about through what Freud called “making the unconscious conscious” via dream analysis and what he called the analyst’s practice of an “evenly-suspended attention” or what Howe similarly called, “consciousness” or “contemplation.” For both therapist and client, this involves openness to one’s whole self as well as openness to one’s experience of the other (Adams, 1995, p.471). This interpersonal awareness frees the therapist to engage collaboratively with his patient to explore the psyche’s potential for wisdom and genuine healing. Howe (1965) wrote that,

the therapist and patient work together on the same level. In the result, we are able to make a certain claim, which must be of some importance; namely, that there is demonstrably a benevolent healing influence which

⁵⁵ Recall that for both Howe and Jung, and unlike Freud, the unconscious is neither a place nor a thing; it is the “state of mind which is unable to relate the attention of the observer to the object observed or experienced.”

can be seen in the actual process of its operation, and that its beneficial results can be observed in detail” (pg. 57).

When we are not open to the whole self, or whole man, according to Howe, we attempt to “cure” rather than “heal” our patient. For Howe, there was a major difference between the three-dimensional methods and techniques that constituted an attempt to “cure” and the four-dimensional artistic and scientific praxis of mutual self-discovery that constituted psychic healing:

“The idea of a cure, therefore, belongs to a partial concept of partial man, with a partial concept of illness and of treatment, depending for its success upon process of dissociation and elimination of the other. This concept is to be seen in complete contrast with a different, total view of man, in which healing is arrived at, not by dissociation from, but by relationship with (acceptance of, and sacrifice in aid of), the other” (Howe, 1965, pg. 51).

Howe’s “consciousness,” as a practice integral to his approach to psychotherapy, was similar to the phenomenological attitude as exemplified in the transcendental phenomenology of Edmund Husserl.⁵⁶ Howe’s “consciousness” served as a privileged way of accessing, attending to, and interpreting whatever phenomena we want to understand. In Howe’s psychotherapy, like the transcendental phenomenologist of Edmund Husserl, he encountered a particular clinical phenomenon in the way in which it unfolded. By embracing clinical phenomena such as depression, anxiety, and psychosis, Howe came into direct contact with the very essence or being of the phenomenon being investigated. Howe’s psychotherapy attempted to recreate what had been lost through a-polarity.

⁵⁶ As was mentioned in the Introduction, Howe was interested in the similarity between the phenomenological *epoché* and meditative awareness, and thus, brilliantly blended the essences of Freud, Husserl, and Krishnamurti.

Psychotherapy, as a four-dimensional art and science of healing, attempts to restore relationship between the patient and his illness, the patient and his therapist, and the self and world. Howe (1965) asserted that,

By means of this relationship with, instead of dissociation from, the items of the illness, it has been found that healing does take place automatically, in course of time, without any effort or interference on the part of either the therapist or the patient. In this sense, the therapist is claimed to be no more than a catalyst, without whose inert presence the healing change could not take place (pg. 56).

Howe attested that the “essence of the rule of healing is ‘Acceptance of the rejected other’ (Howe, 1965, pg. 57). We accept that which is rejected by a process of relearning to perceive and experience freshly. According to Merleau-Ponty, relearning to perceive freshly required that we concentrate all of our efforts upon re-achieving contact with the world. In order to do this we have to first be aware, and then suspend all of our preconceptions. Each phenomenon must be encountered *as if* we knew absolutely nothing about it. This “not knowing” approach inspires a sense of awe and wonder about the particular phenomenon in question.

For Howe, no-thing is the medium of all relationship (Howe, 1965, pg. 55). A genuine inquisitiveness ensues as a result of the openness one experiences during the process of harvesting realization. Like the Zen master, Ching-Yuan retrospectively reflecting on the practice of meditative awareness, “Before we study Zen, the mountains are mountains and the rivers are rivers. While we are studying Zen, however the mountains are no longer mountains and the rivers are

no longer rivers. But then, when our study of Zen is completed, the mountains are once again mountains and the rivers once again rivers." Similarly when the therapist contemplates his relationship to his patient, "I am a therapist, the person that faces me is my client; I am not a therapist, the person that faces me is not my patient; I am a person, my patient is a person; we thus exist in relationship."

Traversing the unknown path, open to what is, we may become the medium for revelation and transformation (Adams, 1995, p.483).

From Howe's perspective, the "healing influence" that both therapist and patient ascertain from a four-dimensional practice of psychotherapy was based on a circular relationship between I and Me, self and world, therapist and patient. The world is not necessarily some objective phenomenon to be encountered "out there," but a reflection of the self's inherent strivings and ambivalent desire to both veil and uncover its own most potential. For this very reason, Howe's psychotherapy was an attitude to life that fostered the openness of experience.

Like Husserl's phenomenological attitude, Freud's evenly suspended attention, and Howe's consciousness, contemplation, or "detached observation," meditation seeks to open the mind up for the possibility of encountering *tathata*, or the "isness" of all transitory appearances. Zen master, Shunryu Suzuki proposed that having a "beginner's mind" was integral to being open to the revelation of latent intuition inherent within the momentary encounters that transpire in everyday experience. To be open for this revelation one must empty oneself of all preconceived attitudinal biases that cover over the potentiality for authentic

understanding. As therapists, from Howe's point of view, it is important to begin anew with each patient, treating them as unique and extraordinary persons with the utmost capacity for growth and sagacity.

Psychotherapy and Intersubjectivity

How is it possible for two subjects, engaged in a meaningful discourse, to communicate relevant thoughts, feelings, and emotions within the context of a therapeutic relationship? The answer to this question is not as obvious as it might appear upon first reflection. In order to venture an answer to this undisclosed, perplexing problem it is first crucial to examine how this theme has been taken up by the various theoretical and philosophical attitudes throughout history.

Natural, scientific approaches posit a (Cartesian) dualism between the subject doing the investigating and the object being investigated. Many psychological theories have adopted this position when pursuing answers to mankind's most esoteric demands. Psychological research has been moving slowly toward standardizing a particular methodology based on the natural scientific mode of inquiry. If this approach becomes a convention then the human subject will be reduced to a collection of neurochemically excitable cell bodies.

The natural sciences have greatly enhanced our understanding of man as a biological organism, but they do not provide clear insight into the nature of human subjectivity. Darwin was able to radically transform the very foundation in which human biological development rested, but he was not able to extend evolutionary biology into the realm of interpersonal communication. Much of the research in

contemporary psychology is attempting to ground the very essence of human subjectivity into a deterministic set of evolutionary-based mental processes governed by natural selection.

Since its inception, psychoanalysis has been encumbered by a felt obligation to base itself on natural science concepts (Stolorow & Atwood, 1994, p.17). Freud developed a psychology that suggested human beings were a product of unconscious mental constructs. The unconscious is a repository of desires, urges, and instincts that guides all conscious mental activity and manifest behavior patterns. Human subjects, coming in contact with one another, are invariably predisposed toward an individualized array of defense mechanisms that preclude the possibility of genuine relatedness.

In contradistinction to the natural scientific mode of inquiry and the Freudian metapsychologically based conception of man, Howe's four-dimensional approach was devoted to uncovering the various meanings that man bestows in an effort to constitute reality. The method that Howe employed to uncover these meanings as they existed and played themselves out in the lives of his patients was referred to as "detached (objective) observation." This method, which was in actuality *a way of being* rather than an identifiable technique to be rehearsed and repeated, is "in full accord with the highest requirements of the scientific method" (Howe, 1965, pg. 58). Howe stripped away the scientism that distorts the scientific method. In *The Mind of the Druid* (1989), Howe asserted that to be "scientific" is to "sustain an attitude of mind which is unprejudiced, observant,

sensitive to its exact attention to the event within its context: i.e. not to things-by-themselves, but always within the compass of their full relationship (pg. 71).

Howe's "science" was not strictly limited to the natural sciences, but became a unique methodology predicated upon a "science of persons" (in relationship).

Howe's "science of persons" called into question the three-dimensional dualism that was so pervasive within Cartesian philosophy and the natural scientific mode of psychological investigation.⁵⁷

Howe's four-dimensional psychotherapy, a psychotherapy for the whole man, was essentially a hermeneutic and spiritual art and science, rather than a mechanistic or naturalistic approach. Howe's "psychotherapy as a way of life" highlighted the interpretative and spiritual modes of exploration that are both present in every angle of psychotherapeutic or scientific investigation. Rather than employ a series of techniques, Howe felt that the psychotherapist's own experience and self-knowledge guide his relationships with patients rather than a body of techniques. Thus, for Howe, as is the case with depth psychology in general, it is vital that the psychotherapist undergo his own analysis. Howe (1965) wrote,

The reason why all therapists must be analyzed is that they need to be themselves as they really are; that is to say, without 'one-upmanship', or 'one-downmanship' or – and this perhaps especially – 'one-out-manship'. *The attempt on the part of the therapist to leave himself out of the therapeutic operation must be regarded as being somewhat outmoded and*

⁵⁷ Howe, unlike many existential-phenomenological psychologists and philosophers, retained a dualistic understanding of the cosmos. His dualism is to be differentiated from Cartesian dualism, which is single and monadic. The dualism to which Howe referred is a "double dualism" in the sense that, in order for relationship to exist, both poles of a given opposition have to be preserved.

ridiculous, because it is impossible. The more he thinks he is not there, the more obstinately intrusive his ‘shadow’ must become. It is therefore much better to accept the problem of the relationship (‘counter-transference’) between analyst and analysand in the first place, keeping it under observation throughout the operation (pg. 232) (Emphasis added).

Countertransference is an integral, yet often times unacknowledged element of the therapeutic relationship. Yet, from Howe’s point of view and from the vantage point of psychoanalysis, it is also integral to the process of healing. Within any therapeutic discourse the therapist is invariably affected by the patient’s interpersonal moves. The patient’s manner of expression and the utterances he uses will routinely elicit an array of unconscious emotional reactions of which the therapist may be unaware. In order for the therapist to be present he must become aware of his desires that are manifested when collaboratively engaged in the process of psychotherapy.

From a narrative perspective, both therapist and patient come to the therapeutic alliance with a preestablished life story. Each participant relies on a uniquely individualized tale to make sense of the self-world relationship. When the therapist ventures an interpretation he is discharging a collection of personal experiences grounded in a particular personal history. The therapist unknowingly draws upon certain themes to conceptualize his patient’s experiences.

That is why, for Howe, the “successful therapist needs to be an expert at his own SELF-EMPTYING. He is required to disabuse himself of any idea of the exclusive rightness of his own opinion, experience or training” (Howe, 1965, pg. 232). By becoming an “expert in self-emptying,” the therapist inevitably, from

Howe's perspective, assumes a position of un-knowing and, both therapist and patient gradually become aware of how ineffective three-dimensional "solutions" are. Hence, there are no universal templates or scripts that tell of the "best" way to live. Healing seems to come when the quest for the so-called "Holy Grail" ends.⁵⁸

Psychotherapy shows the patient that there is no universal recipe for living. According to James Hillman, psychotherapy ends when the patient figures out what brought him to psychotherapy in the first place. Thus, the "aim" of the therapist is to help the patient realize the "what" or the "why" that brought him to therapy. It seems that by gaining a better understanding of what brought him to therapy, the patient has a better grasp of the conflicts that "caused" his suffering. And, once this realization is achieved, it seems probable that the patient can begin to develop his latent creative possibilities.

Jung wrote that "the great decisions in human life usually have far more to do with the instincts and other mysterious unconscious factors than with conscious will and well-meaning reasonableness" (Jung, CW:16, p. 41). Howe (1965) wrote "that a great mystery exists between the essential light that 'I am', and the relative darkness, which is egoic 'me'. From this between state, which is the unknown, we derive all our energy for life, as well as our resistance against the privilege of living" (pg. 63). Healing begins when the therapist conveys to his patient that he truly does not know of any universal scripts that "solve" all of life's problems. In this sense, the therapist's role is somewhat the opposite to that of the priest or

⁵⁸ It ends with the realization that the Holy Grail itself was in fact an illusion.

rabbi. Often times, when a person goes to see a priest, he is looking to first “confess” his “sins,” and second, receive guidance or direction. This often takes the form of the priest telling the person to say a prayer or to rededicate herself toward God and/or the church. From Howe’s perspective, the psychotherapist served as a kind of “priest” who did not know what was “best” for his patient. Or, as Jung asserted, “I don’t have any ready-made philosophy of life to hand to him” (Jung, CW:16, 41). Rather, the psychotherapist can serve as the “priest,” or pastor of souls, who directs his patient to her own “unconscious.”

In effective psychotherapy, healing occurs when the patient learns to "sing" his symptoms or conflicts. Thus, when she can begin to "sing" her symptoms, they no longer remain as symptoms, i.e., the symptoms cease being "symptomatic," and instead, become poetic. This, inevitably, leads the patient away from “personal” realization, three-dimensionality, the “cure”, and toward relationship, four-dimensionality, and healing.

PART IV

Conclusion

CHAPTER 12

Howe's Legacy

In the posthumously published *The Mind of the Druid* (1989), Howe's "last words" in the Bibliography section were: "There is no bibliography of the mind of the Druid. The only clear instruction I have ever received from 'them' is 'Follow the Path!' But what path? Your path: which is not my path" (pg. 143). Howe's *The Mind of the Druid* was the last of his books to be published. *She and Me* preceded it in 1974. During the few years preceding the publication of *Cure or Heal?* in 1965 and until his death in 1973, as evidenced from both *She and Me* and *The Mind of the Druid*, Howe's work became increasingly more metaphysical and spiritual and less psychological, in the strict sense of the term as understood within the contexts of psychoanalysis, behaviorism, cognitive psychology, and humanistic psychology. Moreover, his writing style in *The Mind of the Druid* became more aphoristic. *The Mind of the Druid* was published by Skoob Esoterica, which also published many of the British occultist Kenneth Grant's works. As can be appreciated from *Cure or Heal?*, Howe became increasingly disillusioned by the clinical methods that he felt had become commonplace in psychotherapy. Thus, while he did not completely abandon clinical methods, he believed that they were inadequate, in and of themselves, to understand the nature of psychological experience. Howe began to search for a metaphysics for psychodynamic psychology in 1937 with the publication of *War Dance*. He

continued this search throughout his life, with the search seemingly coming to an end in *The Mind of the Druid*. Howe's last published words suggested that each path toward wholeness is unique. Thus, "my path" will not be "your path." This notion is similar to Krishnamurti's understanding of "truth as a pathless land." It is also similar to Nietzsche's statement, "If you want to follow me, follow yourself." In *The Mind of the Druid*, Howe was less of a psychologist and more of a mystic or spiritual teacher.⁵⁹ His aphorisms were more about creating an experience for his reader rather than imparting information.

In Laing's foreword to Howe's *Cure or Heal?* in 1965, he stated, "perhaps we are now ready to enjoy his simplicity and appreciate his subtlety." It is surprising that, during the 1960's, Howe's jargon-free writing style, his resistances to orthodox psychoanalysis and to the medical model for psychiatry, as well as his integration of spirituality with psychology and psychoanalysis, did not solicit more interest. The question that comes to mind is, "Who was reading Howe?" Moreover, besides the essay by Henry Miller and the foreword by R.D. Laing, why was no attention paid to his work? Furthermore, with the exception of *War Dance*, why were Howe's books never reprinted? As was mentioned in Chapter 6, my hypothesis is that Howe needed a student of his work to present his teachings.

No doubt, the task of presenting Howe's thought was no easy feat. He weaves back and forth between multiple disciplines, thus making it a challenge for anyone. Moreover, as is often the case with Howe's writings, the reader is

⁵⁹ Yet, he still refers to psychoanalytic concepts, albeit from a metaphysical perspective.

compelled to read between the lines to discern the subtleties that permeate Howe's ideas. My familiarity with various psychological, philosophical, and spiritual schools made the task easier, but there were nevertheless many problems that I encountered along the way. In terms of Howe's legacy, how can he be best remembered? Was he a psychoanalyst? Was he a mystic? Was he a philosopher? As Howe eschewed all labels, refusing to describe his work as existentialist, mystical, psychoanalytic, and/or philosophical, it is difficult to even speculate. Yet, it can be suggested that, coupled with the fact that no student of Howe's work ever attempted to present his writings in a systematic fashion, Howe's resistance to affiliate with any psychological, philosophical, or spiritual school led to his being neglected by history.

Forty years later are we now ready to "enjoy Howe's simplicity" and "appreciate his subtlety?" By presenting Howe's work in a systematic fashion, situating his ideas in relation to the better-known pioneers of depth psychology, I feel that I have demonstrated that Howe merits a place in the history of psychodynamic psychology. By examining the conditions and contexts during which Howe wrote, I believe that I have pointed to many of the factors that contributed to Howe being overlooked. By reflecting on many of the theories associated with psychodynamic psychology, I feel that I have positioned Howe's own theories along side those of Freud, Adler, Jung, Winnicott, and Laing. Howe's "simplicity" and "subtlety" can now be both "enjoyed" and "appreciated," along with his paradox and complexity.

Howe can be remembered as a psychodynamic theorist who sought to metaphysically ground his practice of psychotherapy. Thus, he went outside the schools that rely primarily on clinical methods to explain and interpret psychological experience. For Howe, the metaphysical would include both philosophy and spirituality. His psychotherapy was a “way of life,” a vocation that could not simply be left in the consulting room. Howe was a psychotherapist through and through, inside and out. He was in LOVE with the world, but the world was not in LOVE with him. As Howe’s apologist, I introduced him to you, out of LOVE. Although I never knew Howe personally, I feel that, through the process of researching and writing, he and I became FRIENDS. Thus, it was with great pleasure that I presented Eric Graham Howe.

To fill in some of the extant gaps, I hope to one day go to England to conduct research for a biography of Howe. This would further contextualize his ideas as well as put a “face” behind his theories. Yet, I would do this with great reluctance and trepidation, as it seemed to be Howe’s wish to remain personally anonymous. As with Jung, from Howe’s writings it can be surmised that he was more interested in how the collective psyche shaped his life, rather than with personal details. Yet, Howe’s own personal history would add flesh to the manner in which the collective psyche shaped his life and ideas. By presenting his ideas first, I have put the horse before the chariot; what is left is for the charioteer to arrive. However, we have seen the reflection of the charioteer in a mirror...

Bibliography

- Adams, W. (1995). "Revelatory openness wedded with the clarity of unknowing: Psychoanalytic evenly suspended attention, the phenomenological attitude, and meditative awareness" in *Psychoanalysis and Contemporary Thought*, 18 (4), 463-494.
- Adler, A. (1964) *The Individual Psychology of Alfred Adler* edited by Ansbacher, H.L. & Ansbacher, R.R., New York: Harper & Row.
- Assagioli, R. (1965) *Psychosynthesis*, New York: HarperCollins.
- Athanasius (1975) *On the Incarnation*, St. Vladimir's Seminary Press.
- Athanasius (1995) *St. Antony of the Desert*, Tan Books.
- Barnstone, W. (1984) *The Other Bible*, San Francisco: HarperSanFrancisco.
- Bateson, G. (2000) *Steps to an Ecology of Mind*, Chicago: University of Chicago Press.
- Benoit, H. (1990) *Zen and the Psychology of Transformation: The Supreme Doctrine*, Vermont: Inner Traditions.
- Bion, W. (1991) *Transformations*, London: Karnac Books.
- Bion, W. (1995) *Attention and Interpretation*, New Jersey: Jason Aronson.
- Bretall, R. (1973) *A Kierkegaard Anthology*, Princeton: Princeton University Press.
- Buber, M. (1996) *I and Thou*, New York: Touchstone.
- Burston, D. (1991) *The Legacy of Erich Fromm*, Cambridge: Harvard University Press.
- Burston, D. (1996) *The Wing of Madness: The Life and Work of R.D. Laing* Cambridge: Harvard University Press.
- Burston, D. (2000) *The Crucible of Experience: R.D. Laing and the Crises of Psychotherapy*, Cambridge: Harvard University Press.
- Burston, D. (2003) *Personal Correspondence*.
- Burston, D. (2005) *Personal Correspondence*.
- Cassian, J. (1997) *The Conferences*, New York: Paulist Press.
- Clay, J. (1996) *R. D. Laing: A Divided Self*, London: Sceptre.
- Climacus, J. (1982) *The Ladder of Divine Ascent*, New York: Paulist Press.
- Deutsch, E. (1973) *Advaita Vedanta: A Philosophical Reconstruction*, Honolulu: University of Hawaii Press.
- Dicks, H.V. (1970) *Fifty Years of the Tavistock Clinic*, London: Routledge.
- Dordrecht and Boston (1997) *Encyclopedia of Phenomenology*, Kluwer Academic Publishers.
- Ellenberger, H. (1970) *The Discovery of the Unconscious: The History and Evolution of Dynamic Psychiatry*, United States: Basic Books.
- Eigen, M. (1988) *The Psychoanalytic Mystic*, London: Free Association Books.
- Epstein, M. (1995) *Thoughts Without a Thinker: Psychotherapy from a Buddhist Perspective*, New York: Basic Books.
- Epstein, M. (1998) *Going to Pieces Without Falling Apart: A Buddhist*

- Perspective on Wholeness*, New York: Broadway.
- Epstein, M. (2001) *Going on Being: Buddhism and the Way of Change, A Positive Psychology for the West*, New York: Broadway.
- Feldmar, A. (2001) *Entheogens and Psychotherapy* (www.janushead.org/4-1/Feldmar.cfm).
- Frager, R. (1999) *Heart, Self, & Soul: The Sufi Psychology of Growth, Balance, & Harmony*, Wheaton: Quest.
- Freud, S. (1995) *The Freud Reader*, New York: W.W. Norton.
- Freud, S. (1999) *The Standard Edition of the Complete Psychological Works of Sigmund Freud (24 Volumes)*, London: Hogarth Press.
- Fromm, E. (1960) *Zen Buddhism and Psychoanalysis*, New York: Harper & Row.
- Fromm, E. (1978) *Psychoanalysis & Religion*, New Haven: Yale University Press.
- Heaton, J. (2003) *Personal Correspondence*.
- Heidegger, M. (1976) *What is Called Thinking?*, New York: HarperPerennial.
- Heidegger, M. (1982) *On the Way to Language*, San Francisco: HarperSanFrancisco.
- Heidegger, M. (1996) *Being and Time*, New York: SUNY.
- Heidegger, M. (1999) *Contributions to Philosophy*, Indiana: Indiana University Press.
- Heidegger, M. (2001) *Poetry, Language, Thought*, New York: Perennial.
- Howe, E.G. (1931) *Motives and Mechanisms of the Mind: An Introduction to Psychopathology and Applied Psychology*, London: The Lancet Limited.
- Howe, E.G. (1934) *Time and the Child: A Study of Morality and Reality*, London: Faber & Faber.
- Howe, E.G. (1935) *I and Me: A Study of the Self*, London: Faber & Faber.
- Howe, E.G. (1941) *Where This War Hits You*, London: Faber & Faber.
- Howe, E.G. (1943) *The Triumphant Spirit: A Study of Depression*, London: Faber & Faber.
- Howe, E.G. (1944) *Invisible Anatomy: A Study of Nerves, Hysteria, and Sex*, London: Faber & Faber.
- Howe, E.G. (1949) *Mysterious Marriage: A Study of the Morality of Personal Relationships and Individual Obsessions*, London: Faber & Faber.
- Howe, E.G. & Mesurier, L.Le (1950) *The Open Way: A Study in Acceptance*, London: Methuen & Co. Ltd.
- Howe, E.G. (1950) *A Psychologist at Work*, London: Faber & Faber.
- Howe, E.G. (1965) *Cure or Heal? A Study of Therapeutic Experience*, Foreward by R.D. Laing. London: George Allen & Unwin Ltd.
- Howe, E.G. (1971) *War Dance: A Study of the Psychology of War*, New York: Haskell House.
- Howe, E.G. (1974) *She and Me: A New Statement of an Old Problem*, London: Triton & Candle.
- Howe, E.G. (1989) *The Mind of the Druid*, London: Skoob.

- Husserl, E. (1999) *The Essential Husserl*, Indiana: Indiana University Press.
- Jacobi, J. (1973) *The Psychology of C.G. Jung*, New Haven: Yale University Press.
- Jung, C.G. (1976) *The Collected Works of C.G. Jung (Volumes 1-20)*, Princeton: Princeton University Press.
- Jung, C.G. (1989) *Memories, Dreams, Reflections*, New York: Vintage.
- Kakir, S. (1991) *The Analyst and the Mystic: Psychoanalytic Reflections on Religion and Mysticism*, Chicago: University of Chicago Press.
- Kakir, S. (1982) *Shamans, Mystics, and Doctors: A Psychological Inquiry Into India and its Healing Traditions*, New York: Alfred A. Knopf.
- Keating, T. (2002) *Foundations for Centering Prayer and the Christian Contemplative Life*, New York: Continuum.
- Kornfield, J. (1998) *A Path With Heart*, Bantam: New York.
- Krishnamurti, J (1996) *Total Freedom*, San Francisco: Harper.
- Lacan, J. (2002) *Ecrits: A Selection*, New York: W.W. Norton.
- Laing, R.D. (1966) *Sanity, Madness, and the Family*, London: Penguin Books.
- Laing, R.D. (1971) *Self and Others*, London: Pelican Books.
- Laing, R.D. (1978) *The Politics of Experience*, New York: Ballantine Books.
- Laing, R.D. (1990) *The Divided Self: An Existential Study in Sanity and Madness*, London: Penguin Books.
- Lewis, C.S. (1971) *The Four Loves*, New York: Harvest Books.
- Magid, B. (2002) *Ordinary Mind: Exploring the Common Ground of Zen and Psychotherapy*, Boston: Wisdom Publications.
- Malan, D. (1986) *Individual Psychotherapy and the Science of Psychodynamics* London: Butterworths.
- Maharshi, R. (2000) *Talks with Ramana Maharshi*, India: Sri Ramanasramam.
- Merleau-Ponty, M. (2002) *The Phenomenology of Perception*, London: Routledge.
- Miller, H. (1960) *The Wisdom of the Heart*, New York: New Directions.
- Mitchell, J.. (1987) *The Selected Melanie Klein*, New York: Free Press.
- Molino, A. (Ed.) (1999) *The Couch and the Tree: Dialogues in Psychoanalysis And Buddhism*, New York: North Point Press.
- Nichols, M. (1995). *The Lost Art of Listening*, New York: Guilford.
- Nikhilananda, S. (1985) *The Gospel of Sri Ramakrishna*, New York: Ramakrishna-Vivekananda Center.
- Orange, D. (1994). "Countertransference, empathy, and the hermeneutical circle." In R. Stolorow, G. Atwood, & B. Brandchaft (Eds.), *The Intersubjective Perspective*, Northvale, NJ: Aronson.
- Pennington, B. (1982) *Centering Prayer*, New York: Image.
- Plato (1995) *Phaedrus*, New York: Hackett.
- Prabhavananda, S. & Isherwood, C. (2002) *Bhagavad Gita*, New York: Signet.
- Prabhavananda, S. (2002) *Upanishads*, New York: Signet.
- Reich, W. (1953) *The Murder of Christ*, New York: Farrar, Straus, and Giroux.

- Reich, W. (1980) *Character Analysis*, New York: Farrar, Straus, and Giroux.
- Robinson, J. (1990) *The Nag Hammadi Library in English*, San Francisco: HarperSanFrancisco.
- Sartre, J.P. (1969) *Nausea*, New York: New Directions.
- Sartre, J.P. (1989) *No Exit and Other Plays*, New York: Vintage.
- Sartre, J.P. (1993) *Being and Nothingness*, New York: Washington Square Press.
- Stolorow, R. & Atwood, G. (1994). "Toward a science of human experience." In R. Stolorow, G. Atwood, & B. Brandchaft (Eds.), *The Intersubjective Perspective*, Northvale, NJ: Aronson.
- Storr, A. (1990) *The Art of Psychotherapy*, New York: Routledge.
- Suttie, I. (1999) *The Origins of Love and Hate*, London: Free Association Books.
- Thera, N. (1973) *The Heart of Buddhist Meditation*, York Beach: Weiser Books.
- Thera, N. (1998) *Abhidhamma Studies*, Boston: Wisdom Publications.
- Trist, E. (1993) *The Social Engagement of Social Science*, Pennsylvania University of Pennsylvania Press.
- Trungpa, C. (1998) *The Essential Chogyam Trungpa*, Boston: Shambhala.
- Ulanov, A.B. (2001) *Finding Space: Winnicott, God, and Psychic Reality*, Louisville: Westminster John Knox Press.
- Vivekananda, S. (1947) *The Complete Works of Swami Vivekananda (9-Volumes)*, India: Advaita Ashrama.
- Watts, A. (1940) *The Meaning of Happiness*, New York: Harper & Row.
- Watts, A. (1961) *Psychotherapy East and West*, New York: Vintage.
- Watts, A. (1965) *In My Own Way*, New York: Pantheon.
- Watts, A. (1968) *The Wisdom of Insecurity*, New York: Vintage.
- Watts, A. (1977) *The Essential Alan Watts*, Berkeley: Celestial Arts.
- Watts, A. (1989) *The Book: On the Taboo Against Knowing Who You Are*, New York: Vintage.
- Watts, A. (1989) *The Way of Zen*, New York: Vintage.
- Welwood, J. (2000) *Toward a Psychology of Awakening: Buddhism, Psychotherapy, and the Path of Personal and Spiritual Transformation*, Boston: Shambhala.
- Wilber, K. (1999) *The Collected Works of Ken Wilber (Volumes 1-8)*, Boston: Shambhala.
- Winnicott, D.W. (1986) *Home is Where We Start From*, New York: W.W. Norton.
- Winnicott, D.W. (2000) *Psychoanalytic Explorations*, Cambridge, Harvard University Press.

